

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90464 013 ***158.75

068685 FP

DOCUMENT # P02000026754

1. Entity Name

VIA BENETTO, INC.



Principal Place of Business
C/O 18999 BISCAYNE BLVD., SUITE 205
AVENTURA FL 33180

Mailing Address
C/O 18999 BISCAYNE BLVD., SUITE 205
AVENTURA FL 33180



2. Principal Place of Business

849 TANGLEWOOD CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

849 TANGLEWOOD CIR.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
WESTON, FL.

City & State
WESTON, FL.

4. FEI Number

04-3615241

Applied For

Not Applicable

Zip 33327 Country USA

Zip 33327 Country USA

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORONA, FELIPE J
C/O 18999 BISCAYNE BLVD., SUITE 205
AVENTURA FL 33180

7. Name and Address of New Registered Agent

Name CORONA, FELIPE J.

Street Address (P.O. Box Number is Not Acceptable)

17110 SW 36TH COURT

City MIRAMAR

FL

Zip Code

33027

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
P
CORONA, LUIS
849 TANGLEWOOD CIRCLE
WESTON, FL. 33327

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
V
CORONA, FELIPE
17110 SW 36TH COURT
MIRAMAR, FL. 33027

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
S
PARRA, HAIR
17363 SW 19TH ST
MIRAMAR, FL. 33029

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
T
SCHIAYO, GIOVANNA
905 NANDINA DR.
WESTON, FL. 33327

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
D
MORALES, MIRIAN
905 NANDINA DR.
WESTON, FL. 33327

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
D
BERTOLINI, DANIELA
849 TANGLEWOOD CIR.
WESTON, FL. 33327

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Luis Corona* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 04/23/03

Daytime Phone # (954) 385.95.71

CR2E034 (10/02)