

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 29, 2004 8:00 am
Secretary of State

09-29-2004 90001 022 ***150.00

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1. Entity Name
AZUCAR ENTERTAINMENT, INC.



Principal Place of Business

143 SW 9 STREET #203
MIAMI, FL 33131
13984 SW 46 Terr

Mailing Address

13984 SW 46 TERRACE
SUITE "B"
MIAMI, FL 33175

54073303



07132004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **03-0428201** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SEGURA, MARIA E
13984 SW 46 TERRACE
SUITE "B"
MIAMI, FL 33175

**DO NOT WRITE
IN THIS SPACE**

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
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 807.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BRIBIESCA, ANGELO
STREET ADDRESS	111 MENORES
CITY - ST - ZIP	CORAL GABLES,, FL 33134
TITLE	ST
NAME	VASQUEZ, FERMIN
STREET ADDRESS	143 SW 9 STREET #203 <i>13984 SW 46 Terr</i>
CITY - ST - ZIP	MIAMI, FL 33130 <i>#6 MIAMI FL 33175</i>
TITLE	VP
NAME	SEGURA, MARIA
STREET ADDRESS	13984 SW 46 TERR UNIT B
CITY - ST - ZIP	MIAMI, FL 33175
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 807, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MARIA SEGURA

786
7/10/04 226 2801