

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 14, 2003 8:00 am**  
**Secretary of State**

07-14-2003 90343 001 \*\*\*150.00

**DOCUMENT # P02000099237**

1. Entity Name  
**THE BLUE CAFETERIA, CORP.**



Principal Place of Business  
**120 S.W. 109TH AVENUE #6  
MIAMI FL 33174**

Mailing Address  
**120 S.W. 109TH AVENUE #6  
MIAMI FL 33174**

2. Principal Place of Business

3. Mailing Address

**1100 East 20 St.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Hialeah, Fla.**

4. FEI Number

**14-1846100**

Applied For

Not Applicable

Zip

Country

Zip

Country

**33013 U.S.A.**

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JUAREZ, FREDDY  
120 S.W. 109TH AVENUE #6  
MIAMI FL 33174**

Name **Juarez, Freddy**  
Street Address (P.O. Box Number is Not Acceptable)  
**1100 East 20 St.**

City **Hialeah** FL Zip Code **33013**

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

(NOTE: Registered Agent signature required when reinstating)

**7/10/03**  
DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **P**  
STREET ADDRESS **JUAREZ, FREDDY**  
CITY-ST-ZIP **120 S.W. 109TH AVENUE #6  
MIAMI FL 33174**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **V**  
STREET ADDRESS **JUAREZ, ANA**  
CITY-ST-ZIP **120 S.W. 109TH AVENUE #6  
MIAMI FL 33174**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: **[Signature]**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-10-03**  
Date Daytime Phone #

CR2E034 (4/03)

Attachment

90142500  
PD2000099237

July 11, 2003

Ref: The Blue Lapetena, Corp  
PO 2000099237  
1100 E. 25th St.  
Dia. Fla. 33013  
Annual Report

Division of Corporations  
Tallahassee, Fla.  
Annual Report Section

Gentleman:

as per notice received from  
your office requesting \$500.00 for my Annual  
Report we want to inform, that we never  
received a prior correspondence or notice  
as respect this is our first notice, and  
first time in business we had no knowledge  
of this payment. Please help us in this situation  
and remove us the penalties & interest, we are very  
sorry for this inconvenience.

Sincerely yours,

+ Ana C. Traves.