


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Page 1 of 2

**DOCUMENT # P02000100291**

1. Entity Name  
**LIZETTE MARANON-CANCELA, INC.**



FILED

03 AUG 18 AM 11:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**3411 GRANADA BLVD  
CORAL GABLES, FL 33134**

Mailing Address  
**3411 GRANADA BLVD  
CORAL GABLES, FL 33134**

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number ☐ Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**MARANON-CANCELA, LIZETTE  
3411 GRANADA BLVD  
CORAL GABLES, FL 33134**

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!! FEE IS \$160.00**  
After May 1, 2003 Fee will be \$550.00  
Amended UBR is \$81.25  
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 NAME STREET ADDRESS CITY-ST-ZIP	<b>P MARANON-CANCELA, LIZETTE 3411 GRANADA BLVD CORAL GABLES, FL 33134</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>200022582652</b> <b>08/26/03--01052--025 **900.00</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 my address, with all other like empowered.

SIGNATURE: Lizette Maranon-Cancela \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)

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TO: DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314


TO WHOM IT MAY CONCERN:

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2003  
UNIFORM BUSINESS REPORT. I HAVE NOT CHANGED MY PRINCIPAL  
OR MAILING ADDRESS SINCE I INCORPORATED.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION  
IN ITS ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS  
MATTER.

CORDIALLY

  
LIZETTE MARANON-CANCELA  
PRESIDENT