

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 17, 2003 8:00 am**  
**Secretary of State**

02-17-2003 90165 012 \*\*\*158.75

**DOCUMENT # P02000133650**

**1. Entity Name**  
**CAFE VENECIA, CORP**



**Principal Place of Business**

**1956 NW 17 AVE**  
**MIAMI FL 33142**

**Mailing Address**

**1956 NW 17 AVE**  
**MIAMI FL 33142**

**2. Principal Place of Business**

*Same as above*

Suite, Apt. #, etc.

*1956 NW 17 Ave*

City & State

*MIAMI Florida*

Zip

*33142*

Country

*Dade*

**3. Mailing Address**

*Same as above*

Suite, Apt. #, etc.

*1956 NW 17 Ave*

City & State

*MIAMI Florida*

Zip

*33125*

Country

*USA*

☐ CHECK HERE IF MAKING CHANGES

**4. FEI Number**

*27-0043639*

Applied For

Not Applicable

**5. Certificate of Status Desired**

☒ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**AGUILA, JESUS**  
**1956 NW 17 AVE**  
**MIAMI FL 33142**

**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**

*Jesus Aguila* (Jesus Aguila)

(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** *D Presidente / owner* ☐ Delete  
**NAME** **AGUILA, JESUS**  
**STREET ADDRESS** **164 LENAPE DR**  
**CITY-ST-ZIP** **MIAMI SPGS FL 33166**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
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**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

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

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

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**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:**

*Jesus Aguila*

*02/16/2003 786-299-2150*

Date

Daytime Phone #

CR2E034 (10/02)