

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 19, 2007 8:00 am**  
**Secretary of State**

04-19-2007 90411 021 \*\*\*150.00

DOCUMENT # P03000094247

1. Entity Name

BODEGUITAS CUBANAS, INC.



Principal Place of Business

5477 N W 72 AVE  
MIAMI FL 33166

Mailing Address

5477 N W 72 AVE  
MIAMI FL 33166

2. Principal Place of Business - No P.O. Box #

9860 S.W. 12TH TERRACE

3. Mailing Address

9860 S.W. 12TH TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

4. FEI Number

20-1030113

Applied For

Not Applicable

Zip

33174

Country

DADE

Zip

33174

Country

DADE

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

*OK*  
NORIEGA, MELVIN J  
9860 S W 12 TERR  
MIAMI FL 33174

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

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, 2007 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME NORIEGA, MELVIN J  
STREET ADDRESS % 5477 N W 72 AVE  
CITY - ST - ZIP MIAMI FL 33166 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 9860 S.W. 12TH TERRACE.  
CITY - ST - ZIP MIAMI FL 33174 ☒ Change ☐ Addition

TITLE VTS  
NAME NORIEGA, MELVIN F  
STREET ADDRESS 5477 N W 72 AVE  
CITY - ST - ZIP MIAMI FL 33166 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 9860 S.W. 12TH TERRACE.  
CITY - ST - ZIP MIAMI FL 33174 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

MELVIN F. NORIEGA V-Pres 4/19/2007 (305) 863-6388

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #