

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P06492**

1. Entity Name

CALIFORNIA FINANCING, S.A.**FILED****Feb 15, 2001 8:00 am**
Secretary of State

02-15-2001 90013 015 ***150.00

Principal Place of Business

STREET 23, AVENUES 1/3 - NO. 102
POB 1514. C/O MR. JAIME SOLERA
SAN JOSE, COSTA RICA

Mailing Address

STREET 23, AVENUES 1/3 - NO. 102
POB 1514. C/O MR. JAIME SOLERA
SAN JOSE, COSTA RICA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SMITH, JAMES MERRICK
2740 SOUTHWEST 28TH TERRACE
COCONUT GROVE FL 33133

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**-FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	SOLERA, JAIME B.	STREET 23, AVENUES 1/3	SAN JOSE, COSTA RICA				
VD	SOLERA, OLGA DE	STREET 23, AVENUES 1/3	SAN JOSE, COSTA RICA				
SD	JIMENEZ, RODOLFO	STREET 23, AVENUES 1/3	SAN JOSE, COSTA RICA				

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Olga de Solera*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6 Feb./2001

Date

Daytime Phone #

CR2E034 (10/00)