

FILED

03 JUN 25 PM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amended.

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000004916			
1. Entity Name CONSUEGRA, INC.			
Principal Place of Business 2837 SW 25 ST MIAMI, FL 33133		Mailing Address 2837 SW 25 ST MIAMI, FL 33133	
2. Principal Place of Business 2837 SW 25 ST Suite, Apt. #, etc. Miami Florida City & State		3. Mailing Address c/o Hernandez + Taccoronto 8500 W. Flagler Street Suite B-208, Miami FL City & State	
Zip 33133	Country USA	Zip 33144	Country USA
4. FEI Number 65-0369337		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CONSUEGRA, MANUEL 6380 W 24 CT #101 HIALEAH, FL 33016		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	
9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	PD	☐ Delete	
NAME	CONSUEGRA, MANUEL		
STREET ADDRESS	2837 SW 25 ST		
CITY-ST-ZIP	MIAMI, FL 33133		
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			
STREET ADDRESS			
CITY-ST-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	VP - D	☐ Change ☒ Addition	
NAME	Francisco Consuegra		
STREET ADDRESS	2837 SW 25 ST		
CITY-ST-ZIP	Miami, FL 33133		
TITLE	VP - D	☐ Change ☒ Addition	
NAME	Mario Consuegra Vera		
STREET ADDRESS	2837 SW 25 ST		
CITY-ST-ZIP	Miami FL 33133		
TITLE	Treasurer - D	☐ Change ☒ Addition	
NAME	Xiomara Vera de Consuegra		
STREET ADDRESS	2837 SW 25 ST		
CITY-ST-ZIP	Miami FL 33133		
TITLE	Secretary - D	☐ Change ☒ Addition	
NAME	Orlando Faldon Gonzalez		
STREET ADDRESS	2837 SW 25 STREET		
CITY-ST-ZIP	Miami, FL 33133		
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 199.07(3)(b), 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 657, 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: 		Manuel Consuegra, President	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

CR2003 (10-02)