

FILED

03-01-2000 90025 008 ***150.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # P93000030350

1. Entity Name

CROSS SACASA-INCORPORATED

Principal Place of Business

13712-2 SW 147 CIRCLE LANE
MIAMI FL 33186
US

Mailing Address

P.O. BOX 96-0411
MIAMI FL 33177-0004
US

2. Principal Place of Business

Suite, Apt. #, etc.
City & State
ZipCountry

3. Mailing Address

Suite, Apt. #, etc.
City & State
ZipCountry

6. Name and Address of Current Registered Agent

SACASA, MARILYN R
13712-2 SW 147 CIRCLE LN.
MIAMI FL 33186

Name

Street Address

City

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required)

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

11. OFFICERS AND DIRECTORS

TITLE

M

☐ Delete

NAME

SACASA, MARILYN R

STREET ADDRESS

13712-2 SW 147 CIRCLE LN.

CITY-ST-ZIP

MIAMI FL 33186

TITLE

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NAME

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TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 609.1 indicated on this report or supplemental report is true and accurate and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 609.01, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  MARILYN R. SACASA-R

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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