

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000053618

1. Entity Name

FLORIDA TROPICAL, INC.

**FILED**  
**Sep 05, 2000 8:00 am**  
**Secretary of State**

09-05-2000 90045 018 \*\*\*550.00

Principal Place of Business

12747 S.W. 40TH STREET  
SUITE 338  
MIAMI FL 33175

Mailing Address

12747 S.W. 40TH STREET  
SUITE 338  
MIAMI FL 33175

2. Principal Place of Business

3. Mailing Address

3876 S.W. 112 Ave.

Suite, Apt. #, etc.

#313

City & State  
Miami, Florida

Zip

33165

Country

U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0541497

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ZAYAS, ARIEL  
910 WEST AVENUE  
SUITE 716  
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name Ariel Zayas

Street Address (P.O. Box Number is Not Acceptable)

625 - 75 street

City Miami Beach

FL

Zip Code 33141

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D  
NAME CHAGUACEDA, ANGEL  
STREET ADDRESS 12747 BIRD RD., S-338  
CITY-ST-ZIP MIAMI FL 33175 ☐ Delete

TITLE D  
NAME CHABUACEDA, VICTORIA  
STREET ADDRESS 12747 BIRD RD., S-338  
CITY-ST-ZIP MIAMI FL 33175 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME Chaguaceda Angel ☒ Change ☐ Addition  
STREET ADDRESS 3876 S.W. 112 Ave - #313  
CITY-ST-ZIP Miami, FL 33165

TITLE  
NAME Chaguaceda Victoria ☒ Change ☐ Addition  
STREET ADDRESS 3876 S.W. 112 Ave #313  
CITY-ST-ZIP Miami, FL 33165

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

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

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

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

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:

*Victoria Chaguaceda*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-28-2000

Date

Daytime Phone #

CR2E034 (5/00)