

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91629 047 ***150.00

DOCUMENT # P94000078081

1. Entity Name

DELCA TRADE CORPORATION

Principal Place of Business

**898 PALM AVE
HIALEAH FL 33010**

Mailing Address

**898 PALM AVE
HIALEAH FL 33010**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0532017

Applied For

Not Applicable

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

**DEL CALLEJO, FERNANDO
5490 W 9 AVE
HIALEAH FL 33012**

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, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEL CALLEJO, FERNANDO 5490 W 9 AVE HIALEAH FL 33012 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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CR2E034 (9/01)

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-02

305-888-5283

Date

Daytime Phone #

Attachment

436204

Delca Trade Corporation

898 Palm Ave

Hialeah, Florida 33010

P94000078081

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May 13, 2002

Florida Department of State

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

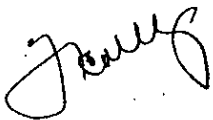
P.O. Box 6327

Tallahassee, Florida 32314

Dear DIVISION OF CORPORATIONS Officer,

Due to a knee operation that kept me in a hospital, I was unable to send the required 2002 UNIFORM BUSINESS REPORT filing payment on time. Since, I and I alone am responsible for all financial matters for the aforementioned company, all Mail received had piled along on my desk, until my return. I ask the department for consideration, and apologize for my delay, as it was beyond my control. Please feel free to contact me at 305-8885283, if any other questions regarding this matter may arise.

Sincerely,



Fernando del Callejo
Owner.