

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90153 017 ***155.00

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DOCUMENT # P96000060386

1. Entity Name

CAFE VARONA, INC.



Principal Place of Business

**610 WREN AVE
MIAMI SPRINGS FL 33166**

Mailing Address

**PO BOX 661454
MIAMI SPRINGS FL 33166**

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

65-0582134

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**VARONA, NELSON J
2464 SW 23RD TERR.
MIAMI FL 33145**

Name

VARONA, NELSON J

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

610 WREN AVE

City

MIAMI, SPRINGS FL

Zip Code

33145

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

Nelson Varona

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

(NOTE: Registered Agent signature required when reinstating)

4-29-03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☒ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

**P
ANTONY, VARONA
610 WREN AVE.
MIAMI SPRINGS FL 33166**

TITLE ☐ Delete

**VP
VARONA, NELSON J
610 WREN AVE
MIAMI SPRINGS FL 33166**

TITLE ☐ Delete

**VP
VARONA, DAVID A
610 WREN AVE
MIAMI SPRINGS FL 33166**

TITLE ☐ Delete

**TREASURY
VARONA, NELSON J
610 WREN AVE
MIAMI SPRINGS FL 33166**

TITLE ☐ Delete

**SECRETARY
LORIE VARONA GAUCHIZ
610 WREN AVE
MIAMI SPRINGS FL 33166**

TITLE ☐ Delete

**NAME
STREET ADDRESS
CITY-ST-ZIP**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

**TREASURY
VARONA, NELSON J
8210 SW 63 PL
MIAMI, FL 33143**

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Change ☒ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

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

SIGNATURE: ANTONY VARONA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-03 305-884-0713

Date

Daytime Phone #

CR2E034 (10/02)