

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
 05-13-2002 90169 041 ***158.75

DOCUMENT # P96000085316

1. Entity Name
WALCA INTERNATIONAL CORP.

Principal Place of Business

**13363 SW 135 AVENUE
 MIAMI FL 33186
 US**

Mailing Address

**13363 SW 135 AVENUE
 MIAMI FL 33186
 US**

2. Principal Place of Business

13067 SW 133 CT.

3. Mailing Address

13067 SW 133 CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA.

City & State

MIAMI, FLORIDA.

Zip

33186

Country

U.S.A.

Zip

33186

Country

U.S.A.

4. FEI Number

65-0736740

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BOVEA ACCOUNTING SERVICES CORP.
 821 SW 122 AVENUE
 MIAMI FL 33184**

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.

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

TITLE **P** ☐ Delete
 NAME **WALL, RENAN JR**
 STREET ADDRESS **10309 SW 162 CT**
 CITY-ST-ZIP **MIAMI FL 33196**

TITLE **VP** ☐ Delete
 NAME **CABRERA, VICTOR**
 STREET ADDRESS **10309 SW 162 CT**
 CITY-ST-ZIP **MIAMI FL 33196**

TITLE **T** ☐ Delete
 NAME **WALL, RENAN C**
 STREET ADDRESS **10309 SW 162 CT**
 CITY-ST-ZIP **MIAMI FL 33196**

TITLE **S** ☐ Delete
 NAME **WALL, RENAN SR**
 STREET ADDRESS **13350 SW 90 TR**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **VPI** ☐ Delete
 NAME **MUNOZ, JORGE**
 STREET ADDRESS **13350 SW 90 TR**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 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 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

Date

Daytime Phone #

04/23/2002

CR2E034 (9/01)