

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2001 8:00 am**  
**Secretary of State**

05-02-2001 90153 001 \*\*\*150.00

**DOCUMENT # P96000089402**

1. Entity Name

VILLACAL, CORP.

Principal Place of Business

Mailing Address

226 SW 5TH AVE  
 #11  
 MIAMI FL 33130

P.O. BOX 126766  
 HIALEAH FL 33012-3373

2. Principal Place of Business

19201 Collins Ave

3. Mailing Address

19201 Collins Ave

Suite, Apt. #, etc.

1042

Suite, Apt. #, etc.

1042

City & State

N. Miami Beach

City & State

N. Miami Beach

4. FEI Number

65-0703609

Applied For

Not Applicable

Zip

33160

Country

USA

Zip

33160

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

CALDERON, LUIS C  
 226 SW 5TH AVE  
 APT 11  
 MIAMI FL 33130

7. Name and Address of New Registered Agent

Name  
 Luis Carlos Calderon  
 Street Address (P.O. Box Number is Not Acceptable)  
 19201 Collins Ave  
 #1042  
 City N. Miami Beach FL Zip Code 33160

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

Luis Carlos Calderon

03/26/01

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, 2001 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 DV  
 STREET ADDRESS ROCHA, TERRY  
 CITY-ST-ZIP 8004 NW 154 ST, #273  
 MIAMI LAKES FL 33016 ☐ Delete

TITLE  
 NAME DP Luis Carlos Calderon ☒ Change ☐ Addition  
 STREET ADDRESS 19201 Collins Ave 1042  
 CITY-ST-ZIP N. Miami Beach FL 33160

TITLE  
 NAME DP  
 STREET ADDRESS CALDERON, LUIS C  
 CITY-ST-ZIP 226 SW 5TH AVE. #11  
 MIAMI FL 33130 ☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

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

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 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Luis Carlos Calderon 04/15/01 305-466-3768

CR2E034 (10/00)