

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000019563

1. Entity Name

VOLARE TRAVEL CONSULTANTS INC.

**FILED**  
**Sep 14, 2000 8:00 am**  
**Secretary of State**

09-14-2000 90007 035 \*\*\*150.00

Principal Place of Business

7418 N.W. 55TH ST.  
MIAMI FL 33166

Mailing Address

7418 N.W. 55TH ST.  
MIAMI FL 33166-4218

2. Principal Place of Business

7661 NW 68 St

3. Mailing Address

7661 NW 68 St

Suite, Apt. #, etc.

103

Suite, Apt. #, etc.

103

City & State

Miami FL

City & State

Miami FL

Zip

33166

Country

USA

Zip

33166

Country

4. FEI Number

65-0731621

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

LAHOZ, LILIANA V  
7418 N.W. 55TH ST.  
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

Liliana V. Lahoz

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

7661 NW 68 St

#103

City

Miami

FL

Zip Code

33166

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

*Liliana Lahoz*

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

(NOTE: Registered Agent signature required when reinstating)

9/11/00

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, 2000 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	D	<input type="checkbox"/> Delete
NAME	LAHOZ, LILIANA	
STREET ADDRESS	12535 N.W. 7TH ST.	
CITY-ST-ZIP	MIAMI FL 33182	
TITLE	D	<input type="checkbox"/> Delete
NAME	LAHOZ, JUAN R	
STREET ADDRESS	12535 N.W. 7TH ST.	
CITY-ST-ZIP	MIAMI FL 33182	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Liliana Lahoz*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/00 (305) 5990244

Date

Daytime Phone #

CR2E034 (9/99)

Attachment # P97000019543  
Volare <sup>BD104514</sup>  
TRAVEL CONSULTANTS

7418 NW 55 Street  
Miami, FL 33166

Ph. (305) 599-0244 • 599-0837  
Fax: (305) 599-0084

SEPTEMBER 11, 2000

DIVISION OF CORPORATIONS  
UNIFORM BUSINESS REPORT FILINGS  
P O BOX 1500  
TALAHASSEE, FL 32302-1500

GENTLEMEN

WE ARE TERRIBLY SORRY THAT OUR UNIFORM BUSINESS  
REPORT WAS NOT FILED ON TIME THIS YEAR.

YOU SEE, WE MOVED TO A NEW LOCATION A COUPLE OF  
MONTHS AGO, AND A LOT OF OUR PAPERS WERE FILED  
IN BOXES.

THIS BILL, BY MISTAKE WAS LEFT IN ONE OF THE BOXES  
AND WE DID NOT SEE IT UNTIL THIS WEEK.

WE BEG THAT YOU ACCEPT OUR PAYMENT IN THE AMOUNT  
OF 150.00.

THE REASON FOR OUR MOVE TO THIS NEW OFFICE WAS  
TO CUT ON EXPENSES, AS YOU MAY KNOW THE TRAVEL  
INDUSTRY IS GOING THRU A REALLY BAD PERIOD DUE TO  
THE AIRLINES CUTTING OUR COMMISSIONS MORE AND MORE  
EVERYDAY.

WE CANNOT AFFORD TO PAY THE 400.00 PENALTY FOR THE  
LATE PAYMENT.

WE BEG YOU TO CONSIDER OUR CASE.

IF YOU HAVE ANY QUESTIONS PLEASE CALL ME AT 305-599-0244

BEST REGARDS,

*Liliana V. Laro*