

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2004 8:00 am**  
**Secretary of State**

04-14-2004 90073 023 \*\*\*150.00

**DOCUMENT # P97000039930**

1. Entity Name  
THE 200 CLUB, INC.



Principal Place of Business  
8361 SW 32 TERR  
MIAMI, FL 33155 US

Mailing Address  
8361 SW 32 TERR  
MIAMI, FL 33155 US

14002728



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04112004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

65-0751455

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

ALVAREZ, PEDRO M  
8361 S.W. 32 TERR.  
MIAMI, FL 33155

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME BERTOT, RAMIRO R  
STREET ADDRESS 9920 S.W. 22 ST.  
CITY-ST-ZIP MIAMI, FL 33165

TITLE T ☐ Delete  
NAME SUNSTEGUI, CARLOS  
STREET ADDRESS 5308 SW 149TH PLACE  
CITY-ST-ZIP MIAMI, FL 33126

TITLE V ☐ Delete  
NAME ALVAREZ, PEDRO M  
STREET ADDRESS 8361 S.W. 32 TERR.  
CITY-ST-ZIP MIAMI, FL 33155

TITLE S ☐ Delete  
NAME PEREDA, RENE B  
STREET ADDRESS 8301 S.W. 32 TERR.  
CITY-ST-ZIP MIAMI, FL 33155

TITLE P ☐ Delete  
NAME GARCIA, EDUARDO  
STREET ADDRESS 11830 SW 92 LN  
CITY-ST-ZIP MIAMI, FL 331862104

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☒ Change ☐ Addition  
NAME SUNSTEGUI, CARLOS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/11/04 305-7109328