

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000054099 (1)

1. Corporation Name

CU-AVANA, INC.

Principal Place of Business

Mailing Address

5801 BIRD ROAD #A
MIAMI FL 33155

5801 BIRD ROAD #A
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/18/1997

4. FEI Number

105-0761960

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

21 7001 N. Waterway Dr. #108

Suite, Apt. #, etc.

22

City & State

23 Miami, FL

Zip

24 33155

Country

25 U.S.A.

2a. Mailing Address

26 7001 N. Waterway Dr. #108

Suite, Apt. #, etc.

27

City & State

28 Miami, FL

Zip

29 33155

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

BARREIRO, ARMANDO SR

-5801 BIRD ROAD #A-
-MIAMI FL 33155-

7001 N. Waterway Dr. #108
Miami, FL 33155

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME CUELLO, LUIS J
STREET ADDRESS 3651 S.W. 132 AVENUE
CITY-ST-ZIP MIAMI FL 33175

TITLE D ☐ DELETE

NAME BARREIRO, ARMANDO SR
STREET ADDRESS 8027 S.W. 4TH STREET
CITY-ST-ZIP MIAMI FL 33155

TITLE ☐ DELETE

NAME President
STREET ADDRESS Armando Barriero, SR.
CITY-ST-ZIP 8025 SW 4 St.
Miami, FL 33155

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Secretary ☐ Change ☒ Addition

1.2 NAME Cuello, Luis J.

1.3 STREET ADDRESS 3651 S.W. 132 Ave

1.4 CITY-ST-ZIP Miami, FL 33175

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* 4-29-98 305-2169-7878

CR2E034 (10/97)