

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90301 001 ***600.00

DOCUMENT # P97000100064

1. Entity Name

UNO TRAVEL, INC.

Principal Place of Business

100 N. BISCAYNE BLVD.

#1001

MIAMI FL 33132

Mailing Address

100 N. BISCAYNE BLVD.

#1001

MIAMI FL 33132

2. Principal Place of Business

7415 N.W. 19th Street

Suite, Apt. #, etc.

Bay H

City & State

Miami, Florida

Zip

33126

Country

U.S.A

3. Mailing Address

7415 N.W. 19th Street

Suite, Apt. #, etc.

Bay H

City & State

Miami, Florida

Zip

33126

Country

U.S.A

4. FEI Number

65-0830288

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FREEMAN, STEPHEN A

520 BRICKELL KEY DRIVE

SUITE O-305

MIAMI FL 33496

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 **DPT.** ☐ Delete
NAME **VILHENA, SERGIO**
STREET ADDRESS **100 N. BISCAYNE BLVD. STE. 1001**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **DVS** ☐ Delete
NAME **GARCIA, OSCAR JR**
STREET ADDRESS **100 N. BISCAYNE BLVD. STE. 1001**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DT** ☐ Change ☐ Addition
NAME **VILHENA, Sergio Martins**
STREET ADDRESS **7415 N.W. 19th Street, Bay H**
CITY-ST-ZIP **Miami, FL 33126**

TITLE **PDS** ☐ Change ☐ Addition
NAME **GARCIA, JR., Oscar**
STREET ADDRESS **7415 N.W. 19th Street**
CITY-ST-ZIP **Miami, FL 33126**

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

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oscar Garcia, Jr., President

01/29/2002

Date

(305)470-8882

Daytime Phone #

CR2E034 (9/01)