2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

P97000100623

1. Entity Name

CHE-TITO'S CORPORATION



FILED Jan 17, 2003 8:00 am Secretary of State 01-17-2003 90033 010 ***150.00

				1000	VE TRUS	ĺ					
Principal Place of Business 12018 S.W. 88TH STREET MIAMI FL			Mailing Address 12018 S.W. 88TH STREET MIAMI FL				(1891/184 118 1841 1881 1881) 8 811	88:8 7 (18) 13	ill ed er berei	1 11888 1441 1 88 1	
2. Principal	Place of Business	3. Ma	3. Mailing Address			_					
Suite, Apt. #, etc.						_					
		Su	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & Sta	ate 	- Cit	City & State			4. F	65-0796426	•	-	pplied For ot Applicable	
Zip Country			Zip Co		5. Ce		Pertificate of Status Desired		8.75 Ad	Iditional	
	6. Name and Add	ress of Current Register	ed Agent ··· ~			7- N	ame and Address of New Re				
VARANDO, NORBERTO					Name						
12018 S.W. 88TH STREET				Street Address			P.O. Box Number is Not Acceptable)				
MIAMI FL											
				City			- 4	FL	Zip Coo	le	
8. The above the obliga	e named entity submits ations of registered ager	this statement for the purp nt.	pose of changing its	registered office o	r registere	ed age	nt, or both, in the State of Flori		L niliar with,	and accept	
SIGNATURE											
	Signature, typed or printed nar	ne of registered agent and title if ap	plicable. (NOTI	E: Registered Agent signal	ure required	when rein	nstating)	DATE			
; Afte	FILE NOW!!! FEE !! or May 1, 2003 Fee w k Payable to Florida			- -	,		Election Campaign Finar Trust Fund Contribution.	ncing	\$5.0 Adder	0 May Be	
10.		OFFICERS AND DIRECTO	DRS	11.		ADD	DITIONS/CHANGES TO OFFIC	ERS AND D	IDECTOR	C (N) 11	
TITLE	PD		☐ Delete	TITLE		- 122	and of the state o		Change	Addition	
NAME STREET ADDRESS	10000 0 100111 (NAME STREET ADDRESS					-		
CITY-ST-ZIP	MIAMI FL			CITY-ST-ZIP							
TITLE	VP		☐ Delete	TITLE					Change	☐ Addition	
NAME STREET ADDRESS	FACUNDA, RONAN 9960 SW 108 STRE			NAME					_	_	
CITY-ST-ZIP	MIAMI FL 33176	:C1		STREET ADDRESS CITY-ST-ZIP						1	
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NAME	VARANDA, MARIA () IA	Dolois .	NAME				سا، سے	Change	. 🔲 Addition	
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CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP						ļ	
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12. I hereby certify that the information supplied with this filling 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:

305·274.77ec