

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90129 044 ***150.00

DOCUMENT # P97000107811

1. Entity Name

WESTWARD CAFE, INC.



Principal Place of Business

**195 WESTWARD DR
MIAMI SPRINGS FL 33166**

Mailing Address

**C/O PEREZ, BEHAR, & ASSOC., INC.
13935 NW 1ST AVENUE
MIAMI FL 33168
US**

2. Principal Place of Business

195 Westward Drive

3. Mailing Address

195 Westward Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami Springs, Florida

City & State

Miami Springs, Florida

4. FEI Number

65-0800601

Applied For

Not Applicable

Zip

Country

33166

USA

Zip

Country

33166

USA

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PEREZ BEHAR & ASSOCIATES, INC
13935 NW 1ST AVENUE
MIAMI FL 33168**

Name

Victor Navarro

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

195 Westward Drive

City

Miami Springs

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

SIGNATURE **Victor Navarro** x *Victor Navarro*

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, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DV** ☒ Delete
NAME **GONZALEZ, RENEE**
STREET ADDRESS **6301 NW 37TH TERR**
CITY-ST-ZIP **VIRGINIA GARDENS FL 33166**

TITLE **DV** ☐ Change ☒ Addition
NAME **MARILIN NAVARRO**
STREET ADDRESS **195 Westward Drive**
CITY-ST-ZIP **Miami Springs, FL 33166**

TITLE **DP** ☒ Delete
NAME **POEY, LOURDES**
STREET ADDRESS **195 WESTWARD DR**
CITY-ST-ZIP **MIAMI SPRINGS FL 33166**

TITLE **DP** ☐ Change ☒ Addition
NAME **Victor Navarro**
STREET ADDRESS **195 Westward Drive**
CITY-ST-ZIP **Miami Springs, FL 33166**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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:

VICTOR NAVARRO, PRESIDENT x *Victor Navarro*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)