

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000108087.

1. Entity Name

LA PLACITA ALEGRE, INC.

**DO NOT WRITE IN THIS SPACE**

**FILED**

02 MAY 28 AM 10:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

901 EAST 2 STREET

Suite, Apt. #, etc.

SUITE #1

City & State

HALEAH FL

Zip

33010

Country

DADE

3. Mailing Address

901 EAST 2 STREET

Suite, Apt. #, etc.

SUITE #1

City & State

HALEAH FL

Zip

33010

Country

DADE

4. FEI Number

65-0807150

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

HERNENEGILDO FERRAZ

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

1030 EAST 4 AVE

City

HALEAH

FL

Zip Code

33010

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IN THIS SPACE**

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.

HERNENEGILDO FERRAZ

DATE

5/23/02

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 DPTS  
NAME ROGUE G RODRIGUEZ BENITEZ  
STREET ADDRESS 901 EAST 2 AVE #1  
CITY-ST-ZIP HALEAH FL 33010

TITLE P  
NAME ROGUE G RODRIGUEZ MORALES  
STREET ADDRESS 901 EAST 2 AVE #1  
CITY-ST-ZIP HALEAH, FL 33010

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

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-06/25/02--01079--001  
\*\*\*\*\*150.00 \*\*\*\*\*150.00

CR2E034B (12/01)

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 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 #

5/23/02

786-543-0514

MAY 16 2002

TO : FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATION

REF : ANUAL REPORT

FROM : LA PLACITA ALEGRE, INC  
901 EAST SECOND AVE # 1  
HIALEAH, FL 33010

SIR :

DUE TO THE CHANGE OF THE REGISTER AGENT WE NEVER RECEIVE  
THE ANNUAL REPORT AND NOW WE HAVE A COPY OF A BLANK REPORT  
TO SENT TO YOU PLEASE DISCHARGE THE PENALTY FOR THIS YEAR  
AND FIND ENCLOSE THE ANNUAL REPORT WITH THE REGULAR  
FILLING FEES.

IF YOU NEED ANY FURTHER INFORMATION PLEASE DO NOT HESITATE  
TO CONTACT US ANY TIME.

SINCERELY YOURS.

  
ROQUE G RODRIGUEZ-BENITEZ.  
PRESIDENT.