

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000001085

1. Entity Name

VARADERO II BEACH MOTEL, INC.

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90358 046 \*\*\*150.00

Principal Place of Business

15901 COLLINS AVENUE  
MIAMI BEACH FL 33160

Mailing Address

15901 COLLINS AVENUE  
MIAMI BEACH FL 33160

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-0811020**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

DE LA CAMARA, ROSA M ESQ  
5201 BLUE LAGOON DRIVE SUITE 100  
MIAMI FL 33126

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, 2001 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VT  
VALDES, IDA  
15901 COLLINS AVE UNIT #115  
SUNNY ISLES BEACH FL 33160 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
SANTANA, LUIS  
15901 COLLINS AVE UNIT #818  
SUNNY ISLES BEACH FL 33160 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
CONDE, EDDY  
15901 COLLINS AVE UNIT #800  
SUNNY ISLES BEACH FL 33160 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
ALVAREZ, VIRGINIA  
15901 COLLINS AVE UNIT #522  
SUNNY ISLES BEACH FL 33160 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
CUESTA, JORGE  
15901 COLLINS AVE UNIT #303  
SUNNY ISLES BEACH FL 33160 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VICE PRESIDENT  
MANUEL Lopez  
15901 COLLINS AVE #617  
Sunny Isles Beach, FL 33160 ☒ Change ☐ Addition

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

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

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

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

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:

*Jorge Cuesta* Treasurer  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-2001 (305) 947-3125

Date

Daytime Phone #

CR2E034 (10/00)