

2000 UNIFORM BUSINESS REPORT (UBR)

1 of 2

DOCUMENT # P98000017738

1. Entity Name

CHICHA CORP.

FILED

00 JUL 18 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

9400 W FLAGLER ST
SUITE 402
MIAMI FL 33174

Mailing Address

9400 W FLAGLER ST
SUITE 402
MIAMI FL 33174

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0890513

Applied For

Not Applicable

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

COUTO, ROSA
2050 CORAL WAY
SUITE 402
MIAMI FL 33145

Name Rosa Couto
Street Address (P.O. Box Number is Not Acceptable) 9400 W. Flagler St. #402
City Miami FL Zip Code 33174

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 Rosa Couto

7/10/00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COUTO, ROSA 9400 W FLAGLER ST UNIT 402 MIAMI FL 33174	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAVIER, ANA R 9400 W FLAGLER ST UNIT 402 MIAMI FL 33174	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

700003349667-3
-08/08/00--01070--015
****150.00 ****150.00

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 NOTED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/10/00 (305) 226-1164

CR2E034 (500)

282
July 11, 2000

**Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500**

**In Re: Chicha, Corp., FEI # 65-0890513
9400 W. Flagler St. # 402
Miami, FL 33174**


To Whom It May Concern:

**On January 25th, 2000, I mailed out to your offices the
2000 Uniform Business Report with a check for the fee
of \$150.00.**

**Yesterday, July 10th, 2000, I received another form
requesting the fee and a penalty. I checked with my
bank, and still they show the check outstanding. I
contacted your offices and told them of the situation,
and they informed me to explain, via a letter, what
had happened and to pay the \$150.00 again.**

**Therefore, attached is the form and a check for \$150.00
in compliance with the Florida Department of Revenue.**

Sincerely,


Rosa Couto