

02-03

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

FILED

03 JUN -9 AM 7:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000093805

1. Entity Name

BARATA LOCA, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

22420 SWORDFISH DR.

Suite, Apt. #, etc.

3. Mailing Address

22420 SWORDFISH DR.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL

4. FEI Number

65-0877559

Applied For

Not Applicable

Zip

33428

Country

USA

Zip

33428

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name JOSE M. VICENTE

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

22420 SWORDFISH DR.

City BOCA RATON

FL

Zip Code
33428

**DO NOT WRITE
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

05-07-03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PST.D
VICENTE, JOSE M.
22420 SWORDFISH DR.
BOCA RATON, FL 33428

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

900020787409
06/11/03-01071-013 **300.00

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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 on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-07-03

(561) 483 2550

Date

Daytime Phone #

7/6/10

CR2634B (12/02)

ATTACHMENT

22420 SWORDFISH DR.
BOCA RATON -FL 33428

RE: ~~BARATA LOCA, INC.~~
P98000093805

DEAR STATE DEPARTMENT,

PLEASE WAIVE MY LATE FEE BECAUSE, I DID NOT RECEIVE THE ANNUAL
REPORT PAPER IN MY HOUSE FROM 2002 AND 2003. THAT'S WHY I AM
SENDING NOW AND I DIDN'T KNOW ABOUT THIS ANNUAL REPORT TOO. I
PROMISE YOU THAT NEXT YEAR, I WILL BE ONE OF THE FIRST PEOPLE TO
FILE THE ANNUAL REPORT. ALSO PLEASE UP DATE MY ADDRESS:

22420 SWORDFISH DR.
BOCA RATON, FL 33428

SINCERELY,



JOSE M. VICENTE