

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91457 025 ***150.00

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1. Entity Name

INVERSIONES CANAGUA/ULTIMATE MEDICAL MANUFACTURING, CORP.



Principal Place of Business

5881 NW 151 ST.

SUITE 111

MIAMI LAKES FL 33014

Mailing Address

5881 NW 151 ST.

SUITE 111

MIAMI LAKES FL 33014

2. Principal Place of Business

3785 NW 82 Ave

Suite, Apt. #, etc.

315

3. Mailing Address

3785 NW 82 Ave

Suite, Apt. #, etc.

315

City & State

Miami Florida

City & State

Miami Florida

Zip

33166

Country

USA

Zip

33166

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0908873

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MINICOZZI, PIETRO

18100 N.W. 68 AVE., #109

MIAMI FL 33015

7. Name and Address of New Registered Agent

Name

Minicozzi Pietro A

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

18318 NW 68th Ave # K

Miami

Miami

FL

Zip Code

33015

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

Minicozzi Pietro

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04/29/03

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

TITLE VP ☐ Delete

NAME MINICOZZI, PIETRO A

STREET ADDRESS 18100 N.W. 68 AVE., #109

CITY-ST-ZIP MIAMI FL 33015

TITLE VP ☐ Delete

NAME MARTINEZ, IRINA

STREET ADDRESS 18100 N.W. 68 AVE., #109

CITY-ST-ZIP MIAMI FL 33015

TITLE S ☐ Delete

NAME MARTINEZ, EUGENIO

STREET ADDRESS 18100 N.W. 68 AVE., #109

CITY-ST-ZIP MIAMI FL 33015

TITLE P ☒ Delete

NAME CARRASCO, RENE I

STREET ADDRESS 15040 SOUTHWEST 51ST STREET

CITY-ST-ZIP MIRIMAR FL 33027

TITLE VPT ☒ Delete

NAME CARRASCO, ANA C

STREET ADDRESS 15040 SOUTHWEST 51ST STREET

CITY-ST-ZIP MIRIMAR FL 33027

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP ☒ Change ☐ Addition

NAME Minicozzi Pietro A

STREET ADDRESS 18318 NW 68th Ave # K

CITY-ST-ZIP Miami FL 33015

TITLE VP ☒ Change ☐ Addition

NAME MARTINEZ, IRINA A

STREET ADDRESS 18318 NW 68th Ave # K

CITY-ST-ZIP Miami FL 33015

TITLE P ☒ Change ☐ Addition

NAME Eugenio Martinez

STREET ADDRESS 18318 NW 68th Ave # K

CITY-ST-ZIP Miami FL 33015

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

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:

Eugenio Martinez Vice President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

04/29/03

Daytime Phone #

305-436-5868

CR2E034 (10/02)