## 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000027187 **EL CANO CORPORATION**

## FILED Jan 29, 2001 8:00 am Secretary of State 01-29-2001 90036 045 \*\*\*158.75

Principal Plac 14280 SW 37 S MIAMI FL 33175	TREET	Mailing Address 14290 SW 37 STREET MIAMI FL 33175				I 1 <b>00</b> 12 <b>00</b> 2 110	ANI	1 <b>00</b> 121 <b>00</b> 21 <b>0</b> 111	14 1 <b>44 1</b> 7 11 <b>80</b> 1 1	<b>1</b> 234 - 1 <b>11</b> 4 - 1 <b>11</b> 4
2. Principal Place of Business		3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_		DO NOT WRI	TE IN THIS	SPACE	
City & State		City & State			4.	FEI Number	65-090863	2	h	pplied For ot Applicable
Zìp	Country	Zìp	Zip Country			5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name and Address of Current	Registered Agent			7.	Name and Ad	dress of New	Registered	Agent	
				Name						
1428	LA, VIVIAN 0 SW 37 STREET 11 FL 33175	e de sentrale de la company		Street Addres	is (P.O. E	Box Number is	Not Acceptab	le)	<del>_</del> <del>,</del> ,	
				City				FL	Zip Cod	de
SIGNATURE _	Signature, typed or printed name of registered agen			d Agent signature requ	iired when r	<u> </u>	an Compoint Ei	DATE	<b>ሰ</b> ድ /	
	requirement and elects to do so.	After MAY 1, Make Check Pay		will be \$550.0 epartment of S		I	on Campaign Fi Fund Contribution	· · ·		OO May Be d to Fees
11.	OFFICERS AND	DIRECTORS	12.		AE	DITIONS/CH	ANGES TO OF	ICERS AND	DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS	P NIEBLA, RAMON JR 14280 SW 37 STREET	☐ Delete		ET ADDRESS					☐ Change	☐ Addition
CITY-ST-ZIP TITLE	MIAMI FL 33175	☐ Delete	TITLE	-ST-ZIP					☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	NIEBLA, NEYDA 14280 SW 37 STREET MIAMI FL 33175			E ET ADDRESS - ST-ZIP						
TITLE NAME STREET ADDRESS	VP NIEBLA, VIVIAN 14280 SW 37 STREET	☐ Delete	TITLE NAMI STRE	i					☐ Change	☐ Addition
- เมิง-ราระที่เวา	MIAMI FL 33175		CITY	-ST-ZIP		<del>-</del> -	<del></del>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NIEBLA, BEATRIZ 14280 SW 37 STREET MIAMI FL 33175	☐ Delete		ı					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		<b>I</b>					☐ Change	Addition
TITLE NAME STREET ADDRESS	<u>.</u>	☐ Delete	TITLE						☐ Change	Addition

of the corporation of the receiver of 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: