**FILED** 

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Jul 17, 2001 8:00 am Secretary of State DOCUMENT # P9900053336 1. Entity Name 07-17-2001 90003 009 \*\*\*150.00 SAN CAYETANO INC. Principal Place of Business Mailing Address 250 N.E. 105TH ST. 250 N.E. 105TH ST. #0077592 MIAMI SHORES FL 33139-2020 MIAMI SHORES FL 33138-2020 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0929395 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required \_6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name' MATUS, FABIAN L Street Address (P.O. Box Number is Not Acceptable) 680 NE 64TH ST #A-409 MIAMI SHORES FL 33138-2020 City Zip Code submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named en FABIAD MATUS - PRESIDENT SIGNATURE. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be -Tax filing requirement and elects to do so. After MAY 1, 2001- Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (10/00) ☐ Change Addition TITLE ☐ Delete TITLE MATUS, FABIAN L NAME NAME 680 NE 64TH ST A409 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33138 CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE gadea, luis a NAME NAME 7917 WEST DR. #6 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORHT BAY VILLAGE FL 33141 CITY-ST-ZIP ☐ Addition Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition Delete TITI F Channe TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition TITLE Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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. FABION MARVS-PERS. 4/37/01
Date

Date

Affachment 190017592

May 7th, 2001.

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

RE: 2001-(UBR) OF SAN CAYETANO, INC. P99000053336.

Dear Officer:

I filled the Annual Report of my corporation San Cayetano, Inc. on time (4/27/01) and by mistake with the hurry I sent it by mail without the stamp. I was out of the city when the mail was returned, and my father in law was in charge of the business but he is very sick and he forgot to contact me for this incident.

I am sending now the report with a check to renew the corporation and I will appreciate your consideration for this accident or error and please receive my report update with the fee of \$150.00.

Thank you for your attention and I hope this will not be happen in the next filing.

God Bless You!

Sincerely,

Fabian L. Matus President