

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #. P99000056897

1. Entity Name

CAFETERIA LA HABANERA, CORP.

Principal Place of Business

2530 West 60 Place #108
Hialeah Florida 33016

Mailing Address

1530 S.W. 125 Court
Miami Florida 33184

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

590 Hialeah Drive

3. Mailing Address

646 N.W. 11th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hialeah Florida 33010

City & State

Miami Florida 33136

4. FEI Number

65-0933104

Applied For

Not Applicable

Zip

33010

Country

U.S.A.

Zip

33136

Country

U.S.A.

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

~~FERRER, LUIS ALBERTO~~

~~1530 S.W. 125 Court~~

~~Miami Florida 33184~~

Name

JOSE AGUSTIN BARAHONA

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

646 N.W. 11th Street

City

Miami

Zip Code

33136

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

JOSE AGUSTIN BARAHONA

3/20/2000

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

(NOTE: Registered Agent signature required when registering)

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.

(See criteria on back)

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Florida Department of Banking and Finance
P.O. Box 11, 2000 Fee will be \$200.00
Under Chapter 607, Florida Statutes, to Department of Banking and Finance

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	DP	☒ Delete
NAME	LUIS A. FERRER	
STREET ADDRESS	1530 SW 125 Ct	
CITY-ST-ZIP	Miami Florida 33184	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DP	☐ Change ☒ Addition
NAME	JOSE AGUSTIN BARAHONA	
STREET ADDRESS	646 N.W. 11th Street	
CITY-ST-ZIP	Miami Florida 33136	
TITLE	DVP	☐ Change ☒ Addition
NAME	MANUEL DIAZ	
STREET ADDRESS	13850 S.W. 18th Street	
CITY-ST-ZIP	Miami Florida 33175	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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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:

JOSE AGUSTIN BARAHONA

3/20/2000

(305) 362-9139

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #