

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90113 033 ***150.00

DOCUMENT # P99000077512

1. Entity Name

CBG MANAGEMENT CORP.

Principal Place of Business

7270 NW 12TH STREET, SUITE 410
MIAMI FL 33126

Mailing Address

7270 NW 12TH STREET, SUITE 410
MIAMI FL 33126

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0954181

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REILLY, KEYLA ALBA
7270 NW 12 STREET
STE 410
MIAMI FL 33126

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P
NAME RABELL, LUIS P
STREET ADDRESS 7270 NW 12TH STREET, SUITE 410
CITY-ST-ZIP MIAMI FL 33126 ☐ Delete

TITLE VT
NAME LA FUENTE, EMILIANO DE
STREET ADDRESS 7270 NW 12 STREET STE 410
CITY-ST-ZIP MIAMI FL 33126 ☒ Delete

TITLE S
NAME REILLY, KEYLA ALBA
STREET ADDRESS 7270 NW 12 STREET STE 410
CITY-ST-ZIP MIAMI FL 33126 ☐ Delete

TITLE DV
NAME IGLESIAS, THOMAS
STREET ADDRESS 7270 NW 12 STREET STE 410
CITY-ST-ZIP MIAMI FL 33126 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ~~Director, Vice President~~
NAME ~~Rabell, Luis~~
STREET ADDRESS ~~7270 NW 12 St, Ste. 410~~
CITY-ST-ZIP ~~Miami, FL 33126~~ ☒ Change ☐ Addition

TITLE ~~Vice President, Treasurer, Director~~
NAME ~~Norris, Wayne~~
STREET ADDRESS ~~7270 NW 12 St, Ste. 410~~
CITY-ST-ZIP ~~Miami, FL 33126~~ ☐ Change ☒ Addition

TITLE ~~Secretary, Director~~
NAME ~~Reilly, Keyla Alba~~
STREET ADDRESS ~~7270 NW 12 St, Ste. 410~~
CITY-ST-ZIP ~~Miami, FL 33126~~ ☒ Change ☐ Addition

TITLE ~~Director Vice President~~
NAME ~~Liano, Cesar~~
STREET ADDRESS ~~7270 NW 12 St, Ste. 410~~
CITY-ST-ZIP ~~Miami, FL 33126~~ ☐ Change ☒ Addition

TITLE ~~President, Director~~
NAME ~~Rey Sanchez~~
STREET ADDRESS ~~7270 NW 12 St, Ste. 410~~
CITY-ST-ZIP ~~Miami, FL 33126~~ ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0144405