## 2002 Uniform Business Report (UBR)

## Apr 17, 2002 8:00 am Secretary of State P99000085945 DOCUMENT # 1. Entity Name TARAGUI TRADING, INC. 04-17-2002 90172 009 \*\*\*150.00 Principal Place of Business Mailing Address 4510 NW 79TH AVE., STE. #1-C 4510 NW 79TH AVE., STE. #1-C MIAM! FL 33166 MIAMI FL 33166 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0964307 Not Applicable \$8.75 Additional Country Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TORRES, JOSE **401 MIRACLE MILE** SUITE 107 **CORAL GABLES FL 33134** 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 ent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE Harcelo Mendoza A Delete TITLE MENDOZA, MARCELO A NAME NAME 4510 NW 79 Ave #1C STREET ADDRESS STREET ADDRESS 12040 SW 41ST DR. Miamir F1 33166 CITY-ST-ZIP MIAMI FL 33175-3645 CITY-ST-ZIP **Change** ☐ Addition TITLE ☐ Delete TITLE NAME LIFSCHITZ, DANIELA NAME 4510 NW 79 Ave \$1C 12040 SW 41ST DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33175-3645 CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITI F Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby certify that the information supplied with this filling 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 trusted impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

s, with all other like empowered.

changed, or on an attachment

SIGNATURE:

**FILED**