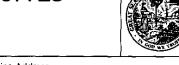
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P99000107723

RICANVE, INC.



Principal Place of Business 782 N.W. 42ND AVENUE SUITE 430

MIAMI FL 33126-5549

City & State

Zip

Mailing Address 782 N.W. 42ND AVENUE SUITE 430

City & State

MIAMI FL 33126-5549

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	

FILED May 02, 2003 8:00 am Secretary of State

05-02-2003 90376 026 ***150.00



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered
Name

MEMBIELA, JOAQUIN

782 NW 42ND AVENUE, SUITE 433

MIANI FL 33126

City

			
8.	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or	r both, in the State of Florida.	l am familiar with, and accept
	the obligations of registered agent.		

Country

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

Country

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

Zip Code

OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE **⊠** Delete TITLE **X** Addition DE ABREU, ERNESTO J DEABREAU, JOSE Q NAME NAME 782 NW 42 Nd AVENUE SUITE 433 782 NW 42ND AVENUE, SUITE 433 STREET ADDRESS STREET ADORESS MIAMI FL 33126-5549 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33126-5549 VTD TITLE □ Delete TITLE ☐ Change ☐ Addition DEABREAU, JOSE A NAME NAME STREET ADDRESS 782 NW 42ND AVENUE, SUITE 433 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33126-5549 CITY-ST-ZIP D۷ Delete TITLE TITLE [7] Change ☐ Addition NAME DEABREAU, ERNESTO J NAME STREET ADDRESS 782 NW 42ND AVENUE, SUITE 433 STREET ADDRESS CITY-ST-ZIE MIAMI FL 33126-5549 CITY-ST-7IP TITLE D۷ ☐ Delete TITLE ☐ Change ☐ Addition DEABREAU, CARMEN E NAME NAME STREET ADDRESS 782 NW 42ND AVENUE, SUITE 433 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33126-5549 CITY-ST-ZIP TITLE ☐ Delete Change Addition DEABREAU, MERCEDES C NAME NAME 782 NW 42ND AVENUE, SUITE 433 STREET ADORESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33126-5549 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition MEMBIELA, JOAQUIN NAME NAME STREET ADDRESS 782 NW 42ND AVENUE, SUITE 433 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33126-5549 CITY-ST-7IP

12. 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 10 or Block 11 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

4/29/03 (305)444-400

CR2E034 (10/0)