

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S17399

1. Entity Name

JULIATOURS, INC.

Principal Place of Business

1430 PONCE DE LEON AVE
CORAL GABLES FL 33134

Mailing Address

1430 PONCE DE LEON AVE
CORAL GABLES FL 33134

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1234204

Applied For

Not Applicable

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

SANCHELIMA, JESUS
235 SW LE JEUNE RD.
MIAMI FL 33134

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME BODEGA, DIONISIO
STREET ADDRESS 2924 COLLINS AVENUE, APT. 404
CITY-ST-ZIP MIAMI BCH FL ☒ Delete

TITLE VPD
NAME PEIRAT, FRANCISCO M
STREET ADDRESS CAPITAN HAYA 38-7 FL
CITY-ST-ZIP MADRID, SPAIN ☒ Delete

TITLE ST
NAME FERNANDEZ, ANA C
STREET ADDRESS 1430 PONCE DE LEON AVE
CITY-ST-ZIP CORAL GABLES FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE PD
NAME DE OCA, JOSE IGNACIO
STREET ADDRESS CAPITAN HAYA 38-7
CITY-ST-ZIP MADRID, SPAIN ☒ Change ☐ Addition

TITLE VPD
NAME SEGURA, JOSE
STREET ADDRESS CAPITAN HAYA 38-7
CITY-ST-ZIP MADRID, SPAIN ☒ Change ☐ Addition

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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

ANAC FERNANDEZ - SECRETARY 07/05/00

Date

(305)

Daytime Phone

447-1555

A0067631



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)