

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S46591

1. Entity Name

COGA CORP.

**FILED**  
**Apr 12, 2000 8:00 am**  
**Secretary of State**

04-12-2000 90081 006 \*\*\*150.00

Principal Place of Business

Mailing Address

444 BRICKELL AVE  
SUITE 51-333  
MIAMI FL 33131  
US

444 BRICKELL AVE  
SUITE 51-333  
MIAMI FL 33131-2403  
US

2. Principal Place of Business

20100 SW 280 ST.

3. Mailing Address

20100 SW 280 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

REDLAND, FLORIDA

City & State

REDLAND, FLORIDA

Zip

33031

Country

USA

Zip

33031

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0309824

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GATTO, VINCENZO  
444 BRICKELL AVE SUITE 51-333  
#7-L  
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name VINCENZO GATTO

\*SAME AGENT - NEW ADDRESS

20100 SW 280 ST.

City REDLAND,

FL

Zip Code 33031

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, 2000 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 ☐ Delete  
NAME GATTO, VINCENZO  
STREET ADDRESS 444 BRICKELL AVE SUITE 51-333  
CITY-ST-ZIP MIAMI FL 33131

TITLE VP ☐ Delete  
NAME RICHARD GONZALEZ  
STREET ADDRESS 2498 SW 17TH AVE #4110  
CITY-ST-ZIP MIAMI FL 33145

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE SECRETARY ☐ Change ☒ Addition  
NAME PILAR CASERO  
STREET ADDRESS 20100 SW 280 ST.  
CITY-ST-ZIP REDLAND, FL 33031

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

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:

PILAR CASERO

1/13/00 (305) 242-4520

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)