

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2002 8:00 am
Secretary of State

05-17-2002 90001 048 ***150.00

DOCUMENT # S93127

1. Entity Name
LA MONEDA TRAVEL AGENCY INC.

Principal Place of Business

**9260 SUNSET DR
 101
 MIAMI FL 33173**

Mailing Address

**9260 SUNSET DR
 101
 MIAMI FL 33173**

2. Principal Place of Business

10300 NW 19 Street

Suite, Apt. #, etc.
109

City & State
miami - FL

Zip
33172

Country
USA

3. Mailing Address

10300 NW 19 Street

Suite, Apt. #, etc.
109

City & State
miami - FL

Zip
33172

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0295873**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**BORJA, ZOILA M
 1115 NW 126 PL
 MIAMI FL 33182**

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	PST LANIADO, MARIA ISABEL 9260 SUNSET DRIVE STE 101 MIAMI FL 33183 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANIADO, MARIA ISABEL 1390 BRICKELL AVE LOBBY MIAMI 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 NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST maria Laniado 10300 NW 19 ST #109 miami - FL 33172 ☒ 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
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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02
 Date

(305) 4133998
 Daytime Phone #

CR2E034 (9/01)