2000 UNIFORM BUSINESS REPORT (UBR)

0231725

DOCUMENT # F93000001430

1. Entity Name

SERVICIOS AVENSA S.A.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 AUG 18 AM 10:51

Principal Place of Business	Mailing Address
2360 NW 66TH AVE. BLDG. 701 STE 260 MIAMI FL 33122 US	P.O. BOX 520617 MIAMI FL 33152-0617 US

DO NOT WRITE IN THIS SPACE

07-13-00 90011 013 $550.00

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0274782 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PENINSULA REGISTERED AGENTS, INC.
200 SOUTH BISCAYNE BLVD #4874
MIAMI FL 33131-2398

7. Name and Address of New Registered Agent

Name: Juan J. Groba

Street Address (P.O. Box Number is Not Acceptable): 2360 NW 66 Ave.,Bldg.701.Ste.#211

City: MIAMI FL Zip Code: 33122

PAID

CK. NO. 001337 0705-00

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: Juan J.Groba DATE: 8-1-00

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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CP BOULTON, HENRY L TORRE EL CHORRO, PISO 13 AV. UNIVERSIDAD CARACAS, VENEZUELA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS TERIUS, JOSE TORRE EL CHORRO, PISO 13 AV. UNIVERSIDAD CARACAS, VENEZUELA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FERNANDEZ, SANTIAGO TORRE EL CHORRO, PISO 13 AV. UNIVERSIDAD CARACAS, VENEZUELA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/99)

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: _____ 4/20/200 (305) 871-8119

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #