

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90174 018 ***150.00

DOCUMENT # F93000004054

1. Entity Name
CITROSUCO NORTH AMERICA, INC.

Principal Place of Business 3911 N. HIGHWAY 19A SUITE 3 MOUNT DORA FL 32757	Mailing Address P.O. BOX 3950 LAKE WALES FL 33859-3950
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5937 Highway 60 East	3. Mailing Address Suite, Apt. #, etc.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State LAKE WALES, FL	City & State	4. FEI Number 51-0272828	Applied For <input type="checkbox"/> Not Applicable
Zip 33859-3950	Country USA	Zip	Country
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent STONE, LEWIS W 4850 N. HIGHWAY 19A MOUNT DORA FL 32757	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	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. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHLEIFER, HARRY ABC-STRABE 44, 20354 HAMBURG GERMANY	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Carlos Fischer Av. Vieira Souto 620-1101 Rio de Janeiro, Brazil CEP 22420000
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SEABROOK, J. ELLIOTT 40742 SR 19 UMATILLA FL 32784	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Nick Emanuel 2413 Berkshire Drive Winter Haven, Fl. 33884
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HELMS, DENNIS J V-5 COUNTRY CLUB VILLAGE LAKE WALES FL 33853	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Doug Nicol 145 Countryside Lane Bear, Delaware 19701
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ricardo de Moraes Rua Codajas, 170 - Leblon Rio de Janeiro, Brazil 22450-100
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE 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: Dennis J. Helms **REQUIRED** **DENNIS J. HELMS** **1/07/00** **(863) 696-7400**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)