

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # F96000001579**

1. Entity Name

Ultamage Properties Inc. BVI

**FILED**  
**Apr 04, 2001 8:00 am**  
**Secretary of State**

04-04-2001 90122 047 \*\*\*150.00

Principal Place of Business  
6601 SW 79th Court  
Miami, FL 33143  
Mailing Address  
6601 SW 79th Court  
Miami, FL 33143

A0042652

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number 52-1921126

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

Leimul Management Corp.  
6601 SW 79th Court  
Miami, FL 33143

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, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution. Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C ☒ Delete  
NAME White, Shona L  
STREET ADDRESS Nanny Cay Tortola, BVI  
CITY-ST-ZIPTITLE D ☐ Change ☐ Addition  
NAME Schmid Rolf  
STREET ADDRESS Pasea Estate, Road Town, Tortola BVI  
CITY-ST-ZIPTITLE DST ☒ Delete  
NAME Richardson, Kay-Linda  
STREET ADDRESS Hannah's Estate  
CITY-ST-ZIP Tortola, B.V.I.TITLE V ☐ Change ☐ Addition  
NAME Duenser Susanne  
STREET ADDRESS Pasea Estate, Road Town, Tortola BVI  
CITY-ST-ZIPTITLE V ☒ Delete  
NAME Escher, Adrian  
STREET ADDRESS c/o KPMG Fides, Muhlemattstr. 58  
CITY-ST-ZIP CH-5001 AarahTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
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CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. Schmid

S. Dunser

Date

Daytime Phone #

26.03.01

CR2E034 (11/00)