

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90376 006 ***158.75

DOCUMENT # F99000005956
 1. Entity Name
FIERA GROUP, INC.

Principal Place of Business Mailing Address
2025 N.W. 102ND AVENUE **2025 N.W. 102ND AVENUE**
SUITE 107 **SUITE 107**
MIAMI FL 33172 **MIAMI FL 33172**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
1301 NW 84 Ave **SAME**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 101
 City & State City & State
MIAMI, FL
 Zip Country Zip Country
33126 **USA**

4. FEI Number Applied For
65-0718272 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
GAGEL, JAMES P
2025 N.W. 102ND AVENUE
SUITE 107
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent
 Name
GAGEL, JAMES P.
 Street Address (P.O. Box Number is Not Acceptable)
1301 NW 84 Ave.
Suite 101
 City State Zip Code
MIAMI **FL** **33126**

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: *James P. Gagel* DATE: **5-1-02**
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.
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	PCD	<input checked="" type="checkbox"/> Delete
NAME	MONTERO, MANUEL	
STREET ADDRESS	2025 N.W. 102ND AVENUE, SUITE 107	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE	VPS	<input checked="" type="checkbox"/> Delete
NAME	GAGEL, JAMES P	
STREET ADDRESS	2025 N.W. 102ND AVENUE, SUITE 107	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	LLONA, ALBERTO	
STREET ADDRESS	2025 N.W. 102ND AVENUE, SUITE 107	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE	D	<input type="checkbox"/> Delete
NAME	DOMENECH, JAMIE	
STREET ADDRESS	2025 N.W. 102ND AVENUE, SUITE 107	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HETTINGER, JONATHAN	
STREET ADDRESS	2025 N.W. 102ND AVENUE, SUITE 107	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SEPULVEDA, GERARDO	
STREET ADDRESS	2025 N.W. 102ND AVENUE, SUITE 107	
CITY-ST-ZIP	MIAMI FL 33172	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAGEL, JAMES P.	
STREET ADDRESS	1301 NW 84 AVE., SUITE 101	
CITY-ST-ZIP	MIAMI, FL 33126	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LLONA, ALBERTO	
STREET ADDRESS	1301 NW 84 AVE, SUITE 101	
CITY-ST-ZIP	MIAMI, FL 33126	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HETTINGER, JONATHAN	
STREET ADDRESS	1301 NW 84 AVE, SUITE 101	
CITY-ST-ZIP	MIAMI, FL 33126	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEPULVEDA, GERARDO	
STREET ADDRESS	1301 NW 84 AVE, SUITE 101	
CITY-ST-ZIP	MIAMI, FL 33126	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LLONA, ALBERTO	
STREET ADDRESS	1301 N.W. 84TH AVE. -STE 101	
CITY-ST-ZIP	Miami, FL 33126	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *James P. Gagel* DATE: **5-1-02** Daytime Phone #: **786-331-9335**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)