2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P96000016591

1. Entity Name

ADRIATIC US CORP.



FILED Mar 25, 2003 8:00 am Secretary of State 03-25-2003 90070 019 ***150.00

					OB WE					
Principal Place of Business ALFRED DUPONT BLDG. 169 E. FLAGLER ST. SUITE 1425 MIAMI FL 33131 US 2. Principal Place of Business			Mailing Address ALFRED DUPONT BLDG. 169 E. FLAGLER ST. SUITE 1425 MIAMI FL 33131 US 3. Mailing Address							
u		Suit	o Ant # etc			4				
Suite, Apt. #, etc.			Suite, Apr. #, etc.				A selfed For			
City & State			& State			4. FEI Number 65-0651567		Applied For Not Applicable		
Zip Country				Country		5. Certificate of Status Desired S8.75 Additive Fee Required				
6. Name and Address of Current			ed Agent		7. Name and Address of New Registered Agent					
					Name		,			
MASLOV, BOZIDAR			Street Address			(P.O. B	P.O. Box Number is Not Acceptable)			
	ş.,									
					•			FL	<u> </u>	
named entity ions of registe	r submits this statement fereit agent.	or the purp	ose of changing its	registered	office or registe	ered ag	ent, or both, in the State of Flor	ida. I am fa	ımiliar with, :	and accept
Signature, typed	or printed name of registered ager	t and title if app	olicable. (NOT	E: Registered A	gent signature requir	ed when re	einstating)	DATE		
May 1, 200	3 Fee will be \$550.00	of State				•	I	,		May Be I to Fees
			l PRS	11.		ΑĽ	DDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTORS	3 IN 11
MASLOV, 1610 LEN	BOZIDAR OX AVE 416		☐ Delete		1				☐ Change	Addition
CPA SALCINES 8370 W. I	S, CARLOS FLAGLER ST., #248		☐ Delete		- 1				☐ Change	☐ Addition
		•	☐ Delete						☐ Change	☐ Addition
,			☐ Delete					<u>.</u>	☐ Change	Addition
_			☐ Delete						☐ Change	Addition
			☐ Delete	TITLE NAME STREET	ADDRESS			<u> </u>	Change	☐ Addition
	6. Name BOZIDAR* OX AVE., S ACH FL 33 named entity ons of registe Signature, typed of LE NOW!! May 1, 200 Payable to CEO MASLOV, 1610 LEN MIAMI BE CPA SALCINES 8370 W. I	CEO MASLOV, BOZIDAR 1610 LENOX AVE 416 MIAMI BEACH FL 33139 Ace of Business Country Countr	ALFR ER ST. SUITE 1425 31 MIAN US ace of Business 3. Mai #, etc. Country Country Zip 6. Name and Address of Current Registere BOZIDAR OX AVE., STE 401 ACH FL 33139 named entity submits this statement for the purpons of registered agent. Signature, typed or printed name of registered agent and title if appropriate and t	ALFRED DUPONT BLDG. ER ST. SUITE 1425 31 Acce of Business 32 Acce of Business 33 Mailling Address 34 Acte of Business 35 Mailling Address 36 City & State Country City & State Country City & State Country ACH FL 33139 Consoler and Address of Current Registered Agent BOZIDAR OX AVE., STE 401 ACH FL 33139 Consoler and the literature of registered agent	ALFRED DUPONT BLDG. ER ST. SUITE 1425 169 E. FLAGLER ST. SUITE 1425 MAMI FL 33131 US ace of Business 3. Mailing Address #, etc. City & State Country City & State Country 6. Name and Address of Current Registered Agent BOZIDAR OX AVE., STE' 401 ACH FL 33139 CPA ASLOV, BOZIDAR ASLOV, BOZIDAR ACH FL 33139 ACH FL 33139 ACH FL 33139 CPA ASLOV, BOZIDAR ACH FL 33139 ACH FL 33139 ACH FL 33139 CPA ASLOV, BOZIDAR ACH FL 33139 ACH FL 33131 A	Mailing Address NT BLDG. ALFRED DUPONT BLDG. 169 E. FLAGLER ST. SUITE 1425 MIAMI FL 33131 US ace of Business 3. Mailing Address #, etc. City & State Country Zip Country Zip Country 6. Name and Address of Current Registered Agent Namo Street Address OX AVE., STE. 401 ACH FL 33139 City Supplicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered office or regist ons of registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature regist and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Registered Agent signature registered agent and stife it applicable. (NOTE: Re	Mailing Address ALFRED DUPONT BLDG. 189 E. FLAGLER ST. SUITE 1425 31	Mailing Address ALFRD DUPONT BLOG. ALFRD DUPONT BLOG. ALFRD DUPONT BLOG. ALFRD DUPONT BLOG. 198 E FLAGER ST. SUITE 1425 31	Not Business	Mailing Address ALFED DUPONT BLDG. ALFER ST. SUITE 1425 MAIN FLDG. ALFER DUPONT BLDG. 198 E. T. S. SUITE 1425 MAIN FLDG. ALFER DUPONT BLDG. 198 E. T. S. SUITE 1425 MAIN FLDG. ALFER ST. SUITE 1425 MAIN FLDG. CHECK HERE IF MAKING CHANGES COUNTRY Zip COUNTRY Zip COUNTRY Zip COUNTRY S. Cerifficate of Status Desired 6065 1567 AN No No ROZDAR Name and Address of Current Registered Agent Name and Address of New Registered Agent City Surel Address (FO. Box Number is Not Acceptable) City FL Zip Codd City City FL Zip Codd City Surel Address (FO. Box Number is Not Acceptable) City FL Zip Codd City City FL Zip City City City FL Zip C

of the corporation or the receiver or to changed, or on an attachment with ess, with all other like empowered.

SIGNATURE:

Daytime Phone #