FILED
Feb 17, 2003 8:00 am
Secretary of State
01-27-2003 90218 016 ****61.25
02-17-2003 90193 042 ****88.75

1.

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) AME

DOCUMENT # P97000034313

1. Entity Name

GE. VA & COMPANY USA INC.

90028959

[redacted]

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8900 Collins Avenue	8900 Collins Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Surfside, Florida	City & State: Surfside, Florida
Zip: 33154 Country: U.S.A.	Zip: 33154 Country: U.S.A.

4. FEI Number: 65-0748712 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Giuseppe Valentino

Street Address (P.O. Box Number is Not Acceptable)

8900 Collins Avenue

City: Surfside FL Zip Code: 33154

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: Giuseppe Valentino Giuseppe Valentino, President/Director December 13, 2002

Signature, type 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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Valentino, Giuseppe 8900 Collins Avenue Surfside, FL 33154
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Valentino, Giovanna 8900 Collins Avenue Surfside, FL 33154
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Valentino, Olimpia 8900 Collins Avenue Surfside, FL 33154
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Valentino, Giancarlo 8900 Collins Avenue Surfside, FL 33154
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Giuseppe Valentino Giuseppe Valentino 12/13/02 (305) 308-2033

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