2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #	P98000074477
1. Entity Name	



DIONE NORTH AMERICA, INC.

|--|

Principal Place of Business	Mailing Address					
2400 N.COMMERCE PKWY	2400 N.COMMERCE PKWY					
SUITE 305	SUITE 305					
WESTON FL 33326	WESTON FL 33326					
2. Principal Place of Business	3. Mailing Address Clo. C. T					
مسر ۸۰ س						

FILED
Jul 07, 2003 8:00 am
Secretary of State

07-07-2003 90145 034 ***550.00

2400 N.COMMERCE PRWY SUITE 305 WESTON FL 33326 2. Principal Place of Business SAME 3. Mailing Address Clo. C. BRIDEAU 13.3221 ORS C.									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & Stat	e	City & State			4. FEI Number 65-0859	Applied For Not Applicat		oplied For ot Applicable	
Zip	Country	Zip 19341	Country	<u></u> -	5. Certificate of Status Desi		8.75 Ade		
	6. Name and Address of Current	Registered Agent			7. Name and Address of N	lew Registered Ag	ent		
			Name		erita da lega e la Sala da Sal Sala da Sala d	್ ಕ್ಷಾಂಗ್ ಸಂಪ್ರಕ್ಷಕ್ಕೆ ಪ್ರಕ್ಷಣೆ ಪ್ರಕ್		}	
	CONNECTION, INC.		Street A	ddress (F	P.O. Box Number is Not Accep				
	RGINIA ST.	•							
STE. 1 [®]									
TALLAHAS	SSEE FL 32301		City	<u> </u>		FL	Zip Cod	le	
the obligat	named entity submits this statement folions of registered agent. Signature, typed or printed name of registered agent		egistered office or			of Florida. I am far	niliar with,	and accept	
After Make Check	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department o			· .	9. Election Campaig Trust Fund Contri	bution.	Added	May Be	
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO				
TITLE	P CARRIDO ENDIQUE	Delete	TITLE		EO	4	Change	Addition	
NAME STREET ADDRESS	GARRIDO, ENRIQUE 62 HAMILTON RD		NAME	244	ich David Glay Tecottage, Lough	CHAREON			
CITY-ST-ZIP	HIGH WYCOMBE BUCK,HP135B0) EN	STREET ADDRESS CITY-ST-ZIP	Cui	an paures, HANTS,	GUNG PO.	e - 20	108	
TITLE	T	Delete	TITLE) SEZNOTPLY		Change	Addition	
NAME	TAPPING, STEPHEN		NAME	Rice	ided GOODLAD	,		, ,	
STREET ADDRESS	48 DISRAELI CRESCENT		STREET ADDRESS	Juga.	SHIELING, THOS	N BORONDH	RUAO		
CITY-ST-ZIP	HIGH WYCOMBE,BUCK HP135EJ	<u>EN</u>	CITY-ST-ZIP	NAS	H, HEIT OFT	· ENGA	<u> </u>		
TITLE Name	S MCGEE, HARRY	Delete	TITLE NAME			[☐ Change	Addition	
STREET ADDRESS*	77 HAMILTON ROAD	للمحاصد وويار سيارا أأرارا	STREET ADDRESS			a+- ··	٠.		
CITY-ST-ZIP	HIGH WYCOMBE, BUCKS HP135E	BQ EN	CITY-ST-ZIP	i					
TITLE		□ Delete	TITLE				Change	Addition	
NAME			NAME						
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP	L					
TITLE		☐ Delete	TITLE				Change	Addition	
NAME			NAME		•				
STREET ADDRESS			STREET ADDRESS	.,					
CITY-ST-ZIP		<u> </u>	CITY-ST-ZIP						
TITLE		☐ Delete	TITLE				Change	☐ Addition	
NAME			NAME						
STREET ADDRESS			STREET ADDRESS					J	

12. 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 lostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a address, with N other like empowered.

CITY-ST-ZiP

SIGNATURE:

CITY-ST-ZIP

EQPlakes

Daytime Phone #