## 2002 UNIFORM BUSINESS REPORT (UBR)

## F1LED 58.00 am 88.00 am 88.00 m P99000067578 DOCUMENT # Secretary of State J. Entity Name 02-26-2002 90161 021 \*\*\*150.00 RUBI TOOLS USA, INC. Mailing Address Principal Place of Business 3311 N.W. 82ND AVENUE 3311 N.W. 82ND AVENUE MIAMI FL 33122 MIAMI FL 33122 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For ≈**65**<del>-</del>0940290 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MARTIN, MIGUEL A Street Address (P.O. Box Number is Not Acceptable) 848 BRICKELL AVENUE SUITE 830 MIAMI FL 33131 City Zìp 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) FILE-NOW!!! FEE.IS-\$150.00 ----9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition TITLE ☐ Delete TITLE Francises O. Jacobo TORRENTS COMAS, JOSEP NAME NAME 3311 NW 82nd Ave. STREET ADDRESS 3311 N.W. 82ND AVENUE STREET ADDRESS **MIAMI FL 33122** CITY-ST-ZIP CITY-ST-ZIP Miami, FL 33122 ☐ Delete Change Addition TITLE D TITLE **BOADA CATASUS, ROSA M** NAME NAME STREET ADDRESS STREET ADDRESS 3311 N.W. 82ND AVENUE CITY-ST-ZIP MIAMI FL 33122 CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition **BOADA ARAGONES, PERE** NAME NAME STREET ADDRESS STREET ADDRESS 3311 N.W. 82ND AVENUE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33122** ☐ Delete TITLE ☐ Change ☐ Addition TITLE PUEYO FLAQUE, MANUEL NAME NAME STREET ADDRESS 3311 N.W. 82ND AVENUE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33122** CITY-ST-7IP Delete ☐ Change ☐ Addition TITLE TITLE MUNNE GUSTEMS, JOSEP NAME NAME 3311 N.W. 82ND AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33122 CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 supplierhental 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 receive 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

SIGNATURE:

changed, or on an attachme

address, with all other like empowered