

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000056647

1. Entity Name

IBSA, US, INC.

Principal Place of Business

1901 S HARBOR CITY BLVD
STE 808
MELBOURNE FL 32907
US

Mailing Address

1901 S HARBOR CITY BLVD
STE 808
MELBOURNE FL 32901
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3461783

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUTLER, MIKE
1901 S HARBOR CITY BLVD
SUITE 808
MELBOURNE FL 32901

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip 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)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

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 DO
NAME BUTLER, MIKE
STREET ADDRESS 475 EAST EAU GALLIE BLVD
CITY-ST-ZIP INDIAN HARBOR BEACH FL 32937 ☐ Delete

TITLE D
NAME ROBSON, GLENN
STREET ADDRESS 1999 AVENUE OF THE STARS 2400
CITY-ST-ZIP LOS ANGELES CA 90067 ☐ Delete

TITLE D
NAME RUBADO, IAN
STREET ADDRESS 914 KENMORE ST
CITY-ST-ZIP PALM BAY FL 32907 ☐ Delete

TITLE D
NAME WOOD, STEVE
STREET ADDRESS 325 ATLANTIC DR
CITY-ST-ZIP MELBOURNE FL 32951 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT
NAME MIKE BUTLER
STREET ADDRESS 50 11TH AVE
CITY-ST-ZIP MELBOURNE BEACH, FL 32951 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SECRETARY
NAME STEVE WOOD
STREET ADDRESS 325 ATLANTIC DR
CITY-ST-ZIP MELBOURNE FL 32951 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/02

321 956 0019

FILED
Jan 07, 2002 8:00 am
Secretary of State

01-07-2002 90012 024 ***150.00



DO NOT WRITE IN THIS SPACE

01/3/96 AV

CR2E034 (9/01)