

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F87531

Entity Name: ALLIMEX, INC.

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Current Principal Place of Business:

3200 N.W. 67 AVE.
BLDG. 1002
MIAMI, FL 33122

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 165803
MIAMI, FL 331165803

New Mailing Address:

FEI Number: 59-2234050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REID, ROBERTO
5700 SW 133 PLACE UNIT 1
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

REID, ROBERTO
14850 SW 43 LANE
MIAMI, FL 33185 US

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:

Electronic Signature of Registered Agent

04/30/2002

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: REID, ROBERTO
Address: 5700 SW 133 PLACE, UNIT 1
City-St-Zip: MIAMI, FL 33183

Title: V (X) Delete
Name: ROSALES, FERNANDO
Address: 9310 SW 137TH AVENUE APT 917
City-St-Zip: MIAMI, FL

Title: S (X) Delete
Name: MOLFINO, JAVIER
Address: 13520 SW 96TH STREET
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDVS (X) Change () Addition
Name: REID, ROBERTO
Address: 14850 SW 43 LANE
City-St-Zip: MIAMI, FL 33185

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTO REID

Electronic Signature of Signing Officer or Director

PDVS

04/30/2002

Date