

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State
 05-07-2002 90357 005 ***150.00

DOCUMENT # F00000002790

1. Entity Name
LANBOX, INC.

Principal Place of Business

**P.O. BOX 520846
 MIAMI FL 33152**

Mailing Address

**P.O. BOX 520846
 MIAMI FL 33152**

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 **65-1004092**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**CORPAMERICA, INC.
 416 S.E. 15 STREET
 FORT LAUDERDALE FL 33316**

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 **C** ☐ Delete
 NAME **ANA, RODRIGO**
 STREET ADDRESS **6740 N.W. 22 STREET**
 CITY-ST-ZIP **MIAMI FL 33152**

TITLE **P** ☐ Delete
 NAME **ANA, RODRIGO**
 STREET ADDRESS **6740 NW 22 STREET**
 CITY-ST-ZIP **MIAMI FL 33152**

TITLE **VP** ☒ Delete
 NAME **HERNANDEZ, A J**
 STREET ADDRESS **7296 NW 44TH STREET**
 CITY-ST-ZIP **MIAMI FL 33166**

TITLE **S** ☐ Delete
 NAME **ANA, RODRIGO**
 STREET ADDRESS **6740 NW 22ND STREET**
 CITY-ST-ZIP **MIAMI FL 33152**

TITLE **D** ☐ Delete
 NAME **VALDIVESIO, ARMANDO**
 STREET ADDRESS **6740 NW 22ND STREET**
 CITY-ST-ZIP **MIAMI FL 33152**

TITLE **D** ☐ Delete
 NAME **RAMIREZ, ERNESTO**
 STREET ADDRESS **6740 NW 22ND STREET**
 CITY-ST-ZIP **MIAMI FL 33152**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 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

Date

Daytime Phone #

CR2E034 (9/01)