

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2005 8:00 am
Secretary of State

03-21-2005 90109 035 ***150.00

DOCUMENT # F00000003614

1. Entity Name

TAMPICO U.S.A. SALES, INC.



Principal Place of Business

3106 N CAMPBELL
CHICAGO IL 60618
US

Mailing Address

3106 N CAMPBELL
CHICAGO IL 60618
US

50028916



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

36-4367411

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE: CEO
NAME: CARSON, JOHN C ☒ Delete
STREET ADDRESS: 65 EAST 55TH STREET
CITY-ST-ZIP: NEW YORK NY 10022

TITLE: VSAT
NAME: SMITH, CHRISTINE J ☐ Delete
STREET ADDRESS: 65 EAST 55TH STREET
CITY-ST-ZIP: NEW YORK NY 10022

TITLE: VTAS
NAME: BODEN, MARK ☐ Delete
STREET ADDRESS: 2625 NORTH GREENVIEW
CITY-ST-ZIP: CHICAGO IL 60614

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: CEO
NAME: Scott Miller ☐ Change ☒ Addition
STREET ADDRESS: 65 East 55th Street
CITY-ST-ZIP: New York, NY 10022

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

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

TITLE: VP
NAME: Dawn M. Stanislaw ☐ Change ☒ Addition
STREET ADDRESS: 3106 N Campbell
CITY-ST-ZIP: Chicago IL 60618

TITLE: VP
NAME: Arthur Acevedo ☐ Change ☒ Addition
STREET ADDRESS: 3106 N Campbell
CITY-ST-ZIP: Chicago IL 60618

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

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 trustee 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 an address, with all other like empowered.

SIGNATURE:

Dawn M. Stanislaw
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/11/05 773/246-0190