

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000004639

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

Entity Name: FRIPAN USA INC.

## Current Principal Place of Business:

3211 PONCE DE LEON BLVD., SUITE 208  
MIAMI, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

3211 PONCE DE LEON BLVD., SUITE 208  
MIAMI, FL 33134

## New Mailing Address:

FEI Number: 65-1030989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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

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: CD ( ) Delete  
Name: PALOU, CARLOS  
Address: 3211 PONCE DE LEON BLVD., SUITE 208  
City-St-Zip: MIAMI, FL 33134

Title: PD ( ) Delete  
Name: GALLES, JORDI  
Address: 3211 PONCE DE LEON BLVD., SUITE 208  
City-St-Zip: MIAMI, FL 33134

Title: V ( ) Delete  
Name: DOMINGUEZ, OSCAR  
Address: 3211 PONCE DE LEON BLVD., SUITE 208  
City-St-Zip: MIAMI, FL 33134

Title: S ( ) Delete  
Name: VILLASANTE, JAVIER  
Address: 3211 PONCE DE LEON BLVD., SUITE 208  
City-St-Zip: MIAMI, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CARLOS PALOU

CD

04/30/2002

Electronic Signature of Signing Officer or Director

Date