

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90372 026 ***150.00

DOCUMENT # F01000002109

1. Entity Name
CEMUSA CORPORACION EUROPEA DE MOBILIARIO URBANO S.A.



Principal Place of Business

**FRANCISCO SANCHEZ 24
MADRID SPAIN 28034**

Mailing Address

**FRANCISCO SANCHEZ 24
MADRID SPAIN 28034**

2. Principal Place of Business

FRANCISCO SANCHA, 24

3. Mailing Address

FRANCISCO SANCHA, 24

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MADRID

City & State

MADRID

Zip

28034

Country

SPAIN

Zip

28034

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**



☒ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPDIRECT-AGENTS

103 N. MERIDIAN STREET

LOWER LEVEL

TALLAHASSEE FL 32301

Name

Toulla Constantinou

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

2119 N.W. 84 Ave.

City

Miami

FL

**Zip Code
33126**

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

3-31-03

FILE NOW!!! - FEE IS \$150.00

After May 1, 2003 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BARON, CARLOS FRANCISCO SANCHEZ 24 MADRID SPAIN 28034	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GONZALEZ, RAUL FRANCISCO SANCHEZ 24 MADRID SPAIN 28034	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MAROTEL, ERIC FRANCISCO SANCHEZ 24 MADRID SPAIN 28034	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARRASCO DELGADO, JOSE MANUEL FRANCISCO SANCHA 24 MADRID-28034	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARON THAIDIGSMANN, CARLOS FRANCISCO SANCHA, 24 MADRID-28034	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP USALLAN-ORTIZ, AGUSTIN-JOSE FRANCISCO SANCHA, 24 MADRID-28034	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-03

Date

Daytime Phone #

CR2E034 (10/02)