

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F61849

FILED  
May 01, 2002 8:00 AM  
Secretary of State

Entity Name: PUMA INTERNATIONAL, INC.

## Current Principal Place of Business:

999 BRICKELL BAY DRIVE  
TOWER ONE, SUITE 602  
MIAMI, FL 33131

## New Principal Place of Business:

## Current Mailing Address:

999 BRICKELL BAY DRIVE  
TOWER ONE, SUITE 602  
MIAMI, FL 33131

## New Mailing Address:

FEI Number: 59-2271307

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIS, WILLIAM C III, ES  
2655 LE JEUNE ROAD  
PENTHOUSE 2  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

GARCIA, LUCY  
999 BRICKELL BAY DRIVE  
SUITE 602  
MIAMI, FL 33131 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: LUCY GARCIA

05/01/2002

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: D ( ) Delete  
Name: RODRIGUEZ, JOSE LUIS  
Address: 999 BRICKELL BAY DRIVE  
City-St-Zip: MIAMI, FL 33131

Title: PD ( ) Delete  
Name: MASELLI, HECTOR  
Address: 999 BRICKELL BAY DRIVE  
City-St-Zip: MIAMI, FL 33131

Title: ST ( ) Delete  
Name: DAVIS, WILLIAM C III  
Address: 2655 LE JEUNE ROAD, PH 2  
City-St-Zip: CORAL GABLES, 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:

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: HECTOR MASELLI

PD

05/01/2002

Electronic Signature of Signing Officer or Director

Date