

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000003490

1. Entity Name
CHERT N.V.

Principal Place of Business
3165 NE 48TH COURT
BLDG. 6B-209
LIGHTHOUSE POINT FL 33064

Mailing Address
3165 NE 48TH COURT
BLDG. 6B-209
LIGHTHOUSE POINT FL 33064

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

COPROLITE CORPORATION
ONE SE THIRD AVE., STE. 1400-A
MIAMI FL 33131

4. FEI Number 98-0057520
Applied For
Not Applicable

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

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
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
D
NOVOTRE, N.V.
KALLA CORONA 30-KRALENDISK
BONAIRE NETHERLANDS ANTILLES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
ATTY
KELEMEN, WILLIAM
APARTADO 80277
CARACAS, 1080, VENEZUELA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
ATTY
KELEMEN, FRANK ANTONIO
APARTADO 80277
CARACAS, 1080, VENEZUELA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
ATTY
KELEMEN, FRANCOIS
APARTADO 80277
CARACAS, 1080, VENEZUELA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete
ATTY
KELEMEN, JOSEFINA
APARTADO 80277
CARACAS, 1080, VENEZUELA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 2001

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 01.07.02 Daytime Phone # (54) 421-9276

FILED
Jan 11, 2002 8:00 am
Secretary of State

01-11-2002 90006 039 ***150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (9/01)