2001 UNIFORM BUSINESS REPORT (UBR)

Apr 25, 2001 8:00 am Secretary of State DOCUMENT # F9700000100 1. Entity Name U.S.A. EXPORT AND IMPORT, INC. 04-25-2001 90115 024 ***150.00 Principal Place of Business Mailing Address 1543 ESTANCIA CIRCLE 1543 ESTANCIA CIRCLE WESTON FL 33327 WESTON FL 33327 957027 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 04-3268703 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEREZ. MARCIAL J Street Address (P.O. Box Number is Not Acceptable) 1543 ESTANCIA CIRCLE WESTON FL 33327 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible -10.-Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PCS ☐ Addition TITLE Change TITLE ☐ Delete PEREZ, MARCIAL J NAME NAME 1543 ESTANCIA CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON FL 33321 CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete PEREZ, ROSIBEL NAME NAME STREET ADDRESS STREET ADDRESS 1543 ESTANCIA CIRCLE CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33327 TITLE Change ☐ Addition TITLE ☐ Delete PEREZ, MARCIAL JR NAME NAME STREET ADDRESS STREET ADDRESS 1543 ESTANCIA CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33327 TITLE ☐ Delete TITLE Change ☐ Addition PEREZ, ILLEANA R NAME NAME STREET ADORESS 1543 ESTANCIA CIRCLE STREET ADDRESS CITY-ST-7IP CITY-ST-7IP WESTON FL 33327 TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 exacute 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. 21 | 15/01

RINTED NAME OF SIGNING OFFICER OR DIRECTOR