

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 25, 2003 8:00 am
Secretary of State

07-25-2003 90094 006 ***550.00

DOCUMENT # F97000004678

1. Entity Name
TRICOM USA, INC.



Principal Place of Business
1 EXCHANGE PLACE
SUITE 400
JERSEY CITY, NJ 07302 US

Mailing Address
1 EXCHANGE PLACE
SUITE 400
JERSEY CITY, NJ 07302 US

90146895

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
13-3927530

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

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. 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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
PELLERANO, MANUEL A
ONE EXCHANGE PL STE 400
JERSEY CITY, NJ 07302 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
CARLSON, CARL
ONE EXCHANGE PL STE 400
JERSEY CITY, NJ 07302 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
TRANCOSO MEJIA, MARCOS J
ONE EXCHANGE PL STE 400
JERSEY CITY, NJ 07302 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
VARGAS, CARLOS
ONE EXCHANGE PL STE 400
JERSEY CITY, NJ 07302 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
TARRAGO, RAMON
ONE EXCHANGE PL STE 400
JERSEY CITY, NJ 07302 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
PEREA, HANK
1 EXCHANGE PLACE, SUITE 400
JERSEY CITY, NJ 07302 ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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
CHIEF FINANCIAL OFFICER
RAMON TARRAGO
ONE EXCHANGE PLACE STE 400
JERSEY CITY, NJ 07302 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2ND VP OF INTERNATIONAL BUSINESS
BELA SZABO
ONE EXCHANGE PLACE STE 400
JERSEY CITY, NJ 07302 ☐ Change ☒ 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:

BELA SZABO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)