

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000003748

1. Entity Name

MIGUEL TORRES USA INC.

FILED

Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90208 004 ***150.00

Principal Place of Business

Mailing Address

% BERGE SETRAKIAN
200 PARK AVENUE
NEW YORK NY 10166

% BERGE SETRAKIAN
200 PARK AVENUE
NEW YORK NY 10166-0005

909597

2. Principal Place of Business

201 CRANDON BLVD

3. Mailing Address

201 CRANDON BLVD

Suite, Apt. #, etc.

342

Suite, Apt. #, etc.

342

City & State

KEY BISCAYNE, FL

City & State

KEY BISCAYNE, FL

Zip

33149

Country

Zip

33149

Country

4. FEI Number

13-4076325

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PT
NAME HOSTENCH, JOAN RAMON P
STREET ADDRESS 200 PARK AVENUE
CITY-ST-ZIP NEW YORK NY 10166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME CIVETTA, MARGARET ESQ
STREET ADDRESS 200 PARK AVENUE
CITY-ST-ZIP NEW YORK NY 10166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME MACDOUGALL, JORGE ALBERTO G
STREET ADDRESS 200 PARK AVENUE
CITY-ST-ZIP NEW YORK NY 10166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME ESTEBAN, LUIS DE JAVIER
STREET ADDRESS 200 PARK AVENUE
CITY-ST-ZIP NEW YORK NY 10166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 01-23-2000

Date

X 3053656767

Daytime Phone #

01/28/2000