

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

FILED
Apr 28, 2002 8:00 am
Secretary of State

04-28-2002 90773 018 ***150.00

DOCUMENT # F99000006224

1. Entity Name

UOL-E CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

800 Brickell Avenue

3. Mailing Address

800 Brickell Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 1109

Suite 1109

City & State

City & State

Miami, FL

Miami, FL

4. FEI Number

52-2207244

Applied For

Not Applicable

Zip

Country

Zip

Country

33131

USA

33131

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Oppenheim, Steven

Street Address (P.O. Box Number is Not Acceptable)

First Union Bank Building

800 Brickell Avenue, Ste. 1109

City

FL

Zip Code

33131

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.

Steven Oppenheim

4/1/02

(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) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 DP
NAME DE SIQUEIRA VIEIRA, CLAUD ANTONIO
STREET ADDRESS AL BARAO DE LIMEIRA, 425
CITY-ST-ZIP SAO PAULO SP BRAZIL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME OPPENHEIM, STEVEN
STREET ADDRESS 800 BRICKELL AVENUE, STE. 1109
CITY-ST-ZIP MIAMI, FL 33131

TITLE
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven Oppenheim
Secretary

4/1/02

Date

305-371-8555

Daytime Phone #

CR2E034B (12/01)