## 2001 UNIFORM BUSINESS REPORT (UBR)

## Jul 18, 2001 8:00 am **DOCUMENT # K81574 Secretary of State** 06-26-2001 90394 022 \*\*\*150.00 TRONCO AMERICA CORP. 07-18-2001 90261 038 \*\*\*400.00 Mailing Address Principal Place of Business 701 BRICKELL AVE. 701 BRICKELL AVE. SUITE 3000 SUITE 3000 MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FFI Number 65-0115700 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent INTRASTATE REGISTERED AGENT CORPORATION Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVE. **SUITE 3000** MIAMI FL 33131 Zip Code City 8) The apove 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change Addition CR2E034 (10/00 TITLE ☐ Delete TITLE STEIN, ALEJANDRO NAME MALIF STREET ADDRESS 380 CENTER ST. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL ■ Addition ☐ Change Delete TITLE RDF NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition TITLE Delete TITLE STREET ADDRESS CITY-ST-ZIP City-St-ZiP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Channe ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 supplied entary sport 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 received by the entary sport is required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an all achient unit analysis with all other like empowered. 27 APR 2001 ONT4122 7767868 SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED



June 28, 2001

TRONCO AMERICA CORP. 701 BRICKELL AVE. SUITE 3000 MIAMI, FL 33131 US

Subject: TRONCO AMERICA CORP.

Reference

K81574

Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/jg ANNUAL REPORTS SECTION