

2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

01 MAY -3 AM 10:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0009047 AF

DOCUMENT # L00000003236

1. Entity Name
INTERMARKETING EXPRESS USA LLC

Principal Place of Business

2665 BAYSHORE DRIVE, SUITE 703
MIAMI FL 33133

Mailing Address

2665 BAYSHORE DRIVE, SUITE 703
MIAMI FL 33133



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3326 Mary Street

3. Mailing Address
2665 South Bayshore Drive

Suite, Apt. #, etc.
Suite 603

Suite, Apt. #, etc.
Suite 703

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number
65-1010265

Applied For
Not Applicable

Zip Country
33133 USA

Zip Country
33133 USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WORLD CORPORATE SERVICE, INC.
2665 BAYSHORE DRIVE, SUITE 703
MIAMI FL 33133

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.

(NOT: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME Navarro, Carlos Mauricio
STREET ADDRESS 3326 Mary Street, Suite 603
CITY-ST-ZIP Miami, Florida 33133

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Carlos Mauricio Navarro 4/27/01 (305) 444-3177

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)