

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

04 APR 20 PM 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L88314

1. Entity Name

GENESIS U.S.A. CORP.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1221 NW 165th Street

3. Mailing Address

1221 NW 165th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number
65-0238422

Applied For
Not Applicable

Zip
33169

Country
USA

Zip
33169

Country
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
Luis A. Quintero

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

1221 NW 165th Street

City
Miami FL Zip Code
33169

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.

000033124020
04/20/04--01042--006 **158.75

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 D
NAME Luis A. Quintero
STREET ADDRESS 1221 NW 165th Street
CITY-ST-ZIP Miami, FL 33169

TITLE Director
NAME Norma Quintero
STREET ADDRESS 1221 NW 165th Street
CITY-ST-ZIP Miami, FL 33169

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**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE: Luis A. Quintero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 14, 2004

(305)591-3565

Date

Daytime Phone #

CR2E034B (12/02)