

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000007243

FILED
Jul 09, 2002 8:00 AM
Secretary of State

Entity Name: COSTA FOUNDATION INC.

Current Principal Place of Business:

9234 S.W. 9TH TERRACE
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

% K.L. GRAGG, WHITE & CASE, LLP
200 S BISCAYNE BLVD., #4900
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-1052664 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE & CASE, LLP
% K. LAWRENCE GRAGG
200 S BISCAYNE BLVD., SUITE 4900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MENDEZ, MELISA
Address: 9234 S.W. 9TH TERRACE
City-St-Zip: MIAMI, FL 33174

Title: D () Delete
Name: COSTA, MIRTA
Address: 17822 N.W. 81ST COURT
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: MENDEZ, MICHAEL
Address: 9234 S.W. 9TH TERRACE
City-St-Zip: MIAMI, FL 33174

Title: D () Delete
Name: COSTA, OSVALDO
Address: 17822 N.W. 81ST COURT
City-St-Zip: MIAMI, FL 33015

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P () Change (X) Addition
Name: MENDEZ, MELISA
Address: 9234 SW 9 TERRACE
City-St-Zip: MIAMI, FL 33174

Title: VP () Change (X) Addition
Name: MENDEZ, MIRTA
Address: 17822 NW 81 COURT
City-St-Zip: MIAMI, FL 33015

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELISA MENDEZ

P

07/09/2002

Electronic Signature of Signing Officer or Director

Date

MICHAEL MENDEZ, S/T
9234 SW 9 TERRACE
MIAMI, FLORIDA 33174