

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N14295

1. Entity Name

DIANOVA USA, INC.

Principal Place of Business

8142 BYRON AVENUE  
SUITE 5  
MIAMI BEACH FL 33141

Mailing Address

450 WALKER VALLEY RD  
PINEBUSH NY 12566-3907  
US

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

218 E 30th STREET

Suite, Apt. #, etc.

City & State

City & State

NEW YORK NY

Zip

Country

Zip

10016

Country

USA

4. FEI Number

65-0008668

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

VITAL, PEDRO  
8142 BYRON AVE APT 5  
MIAMI BEACH FL 33141

7. Name and Address of New Registered Agent

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE CD ☒ Delete  
NAME COSTIL, MICHEL  
STREET ADDRESS 8162 BYRON AVENUE., STE 5  
CITY-ST-ZIP MIAMI BEACH FL 33141

TITLE VD ☐ Delete  
NAME DEROOVER, GIRO  
STREET ADDRESS 450 WALKER VALLEY RD  
CITY-ST-ZIP PINEBUSH NY 12566

TITLE PD ☐ Delete  
NAME PRIETO, MARIO  
STREET ADDRESS 450 WALKER VALLEY RD  
CITY-ST-ZIP PINEBUSH NY 12566

TITLE D ☐ Delete  
NAME LEAL, CRISTINA  
STREET ADDRESS 450 WALKER VALLEY RD  
CITY-ST-ZIP PINEBUSH NY 12566

TITLE ST ☐ Delete  
NAME BRECKENRIDGE, LELAND D JR  
STREET ADDRESS 130 E. 63RD ST., APT E3  
CITY-ST-ZIP NEW YORK NY 10021

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition  
NAME DE ROOVER, GIRO  
STREET ADDRESS 218 E 30th STREET Apt 4  
CITY-ST-ZIP NEW YORK NY 10016

TITLE CD ☒ Change ☐ Addition  
NAME PRIETO, MARIO  
STREET ADDRESS 450 Walker Valley RD  
CITY-ST-ZIP PINE BUSH, NY 12566

TITLE D ☐ Change ☒ Addition  
NAME MAURO LUCCARDINI  
STREET ADDRESS 450 Walker Valley RD  
CITY-ST-ZIP PINE BUSH, NY 12566

TITLE B ☒ Change ☐ Addition  
NAME BRECKENRIDGE, LELAND D JR  
STREET ADDRESS V/S  
CITY-ST-ZIP 108 E 38th  
NEW YORK NY 10017

TITLE T ☐ Change ☒ Addition  
NAME CAMPANTE DEROOVER, ANA  
STREET ADDRESS 218 E 30th STREET, Apt 4  
CITY-ST-ZIP NEW YORK NY 10016

TITLE V ☐ Change ☒ Addition  
NAME GOMEZ CESAR  
STREET ADDRESS 218 E 30th STREET, Apt 2  
CITY-ST-ZIP NEW YORK NY 10016

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GIRO DEROOVER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/19/2000

Date

212.6865331

Daytime Phone #

FILED  
Jan 26, 2000 8:00 am  
Secretary of State

01-26-2000 90052 016 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE