

# 2003 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT# P00000007357

1. Entity Name

**UNIBRAS SYSTEMS CORPORATION**

FILED

03 OCT -9 PM 1:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
**600 S. FEDERAL HWY,STE.202 600 S. FEDERAL HWY,STE.202**  
**DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441**

2. Principal Place of Business 3. Mailing Address  
**2410 B NW 16 TH LANE 2410 B NW 16 TH LANE**

Suite Apt. #, etc. Suite Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State 4. FEI Number Applied For  
**Pompano Beach, FL 33064 Pompano Beach, FL 33064 650970458**  
Not Applicable  
Zip Country Zip Country 5. Certificate of Status Desired ☐ \$8.75 Additional  
**FL 33064 USA FL 33064 USA** Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent  
**COSTA, JAIR** Name  
**2410 B NW 16 TH LANE** **TAX HOUSE CORPORATION**  
**Pompano Beach, FL 33064-1983** Street Address (P.O. Box Number is Not Acceptable)  
**1261 EAST SAMPLE ROAD**  
City City **Pompano Beach** FL Zip Code **33064**

8. The above named entity submits this report for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *[Signature]* *Procs.* *08/11/2003*  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW! FEE IS \$150.00**  
**After MAY 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Department of State**  
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS				12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	PD	<input type="checkbox"/> Delete		TITLE	PD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DE SILVA, GIL			NAME	DE SILVA, GIL		
STREET ADDRESS	600 S. FEDERAL HWY, STE.202			STREET ADDRESS	2410 B NW 16 TH LANE		
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441			CITY-ST-ZIP	Pompano Beach, FL 33064-1983		
TITLE	STD	<input type="checkbox"/> Delete		TITLE	STD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	COSTA, JAIR			NAME	COSTA, JAIR		
STREET ADDRESS	600 S. FEDERAL HWY, STE.202			STREET ADDRESS	2410 B NW 16 TH LANE		
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441			CITY-ST-ZIP	Pompano Beach, FL 33064-1983		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 11 or Block 12 N changed or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*08/22/2003 (954) 977-9100*

Date Daytime Phone #

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FLORIDA DEPARTMENT OF STATE  
Division of Corporation  
2002 Uniform Business Report (UBR)  
409 East Gaines Street  
Tallahassee, FL 32399

Re: *Filing of Uniform Business Report 2002*

**P00000007357**

**UNIBRAS SYSTEMS CORPORATION**

To Whom It May Concern:

This letter is to inform you that we have never received a  
Uniform Business Report form in the mail.

We would like to request you that you forgive all extra  
fees and penalties other than the primary of \$150.00 and  
accept the filling of our attached UBR, which has been  
prepared by our accountant.

Any questions or concern, feel free to contact our  
accountant at (954) 725-4600 and speak to Mr. Breno Gomes.

Sincerely,



JAIR COSTA  
Director

**UNIBRAS SYSTEMS CORPORATION**  
2410 B NW 16 TH LANE  
POMPANO BEACH FL 33064