

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # P00000D11001

1. Entity Name

CARCORP USA INC.

02 OCT 29 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

2600 NW 55th CT.

3. Mailing Address

22459 WATERSIDE DR.

Suite, Apt. #, etc.

SUITE 234

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

FT. LAUDERDALE FL

City & State

BOCA RATON FL

Zip

33309

Country

US

Zip

33428

Country

US

4. FEI Number

65-098 0091

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

MICHAEL DEMEO

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

22459 WATERSIDE DR.

City BOCA RATON

FL

Zip Code

33428

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 Michael Demeo

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

(NOTE: Registered Agent signature required when reinstating)

DATE 10/16/02

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1, Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>PRESIDENT</u> <u>MICHAEL DEMEO</u> <u>22459 WATERSIDE DR.</u> <u>BOCA RATON FL 33428</u>
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**DO NOT WRITE  
IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael Demeo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL DEMEO

Date

Daytime Phone #

10/16/02 954735 5557

CR2E034B (12/01)

Thomas J. Moore, Esq.  
2600 NW 55<sup>th</sup> Court  
#235  
Fort Lauderdale, FL 33309  
954-735-5557  
561-523-4214

October 23, 2002

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Carcorp USA, Inc.

To Whom It May Concern:

Enclosed please find a cashiers check in the amount of \$150.00. The same representing the Fee due for 2002. Additionally, I am asking for a waiver of the penalty fee for late filing as my client, Michael J. DeMeo, President of Carcorp USA, Inc., did not receive the forms or notice at the mailing address provided to the State. Please advise me immediately if there is a problem with this waiver.

Sincerely,

Thomas J. Moore, Esq.  
Staff Counsel