

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90119 028 ***150.00

DOCUMENT # P00000019864

1. Entity Name
PRO ENTERPRISES USA, INC.



Principal Place of Business
7758 NW 46 ST
MIAMI FL 33166

Mailing Address
7621 SW 175TH ST
MIAMI FL 33157

2. Principal Place of Business

3. Mailing Address
7758 NW 16TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MIAMI, FLORIDA

4. FEI Number **65-1045272**

Applied For
Not Applicable

Zip

Country

Zip
33166

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

AZPURNA, ALEJANDRO
7621 SW 175TH ST
MIAMI FL 33157

7. Name and Address of New Registered Agent

Name **ALAN AZPURUA**

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

7758 NW 46TH STREET

City **MIAMI**

FL

Zip Code
33166

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.

SIGNATURE **ALAN AZPURUA** **4/15/2003**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 **VTD** ☐ Delete
NAME **URDANETA, CARMEN**
STREET ADDRESS **7621 NW 175TH STREET**
CITY-ST-ZIP **MIAMI FL 33172**

TITLE **PD** ☐ Delete
NAME **AZPURUA, ALEJANDRO A**
STREET ADDRESS **7621 S.W. 175TH STREET**
CITY-ST-ZIP **MIAMI FL 33157**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VTD** ☒ Change ☐ Addition
NAME **CARMEN DE AZPURUA**
STREET ADDRESS **7758 NW 46TH STREET**
CITY-ST-ZIP **MIAMI, FL 33166**

TITLE **PD** ☒ Change ☐ Addition
NAME **ALAN AZPURUA**
STREET ADDRESS **7758 NW 46TH STREET**
CITY-ST-ZIP **MIAMI, FL 33166**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ALAN AZPURUA** **4-15-2003** **305.718.8121**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)