

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 17, 2001 8:00 am
Secretary of State

05-17-2001 90396 019 ***150.00

DOCUMENT # P00000042749

1. Entity Name

BONA TRANS USA INC.

Principal Place of Business

Mailing Address

**19321 C US HWY 19 N, SUITE 601
CLEARWATER FL 33764****19321 C US HWY 19 N, SUITE 601
CLEARWATER FL 33764****00007004**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3641796

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GAWRON, MARY
19321 C US HWY 19 N, SUITE 601
CLEARWATER FL 33764**

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P OBSZANSKI, ZENON 19321 C US HWY 19 N, SUITE 601 CLEARWATER FL 33764			
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5.10.2001

Date

Daytime Phone #

CR2E034 (10/00)

May 10th, 2001

attachment
D# P00000042749
B0057582

UNIFORM BUSINESS REPORT
DIVISION OF CORPORATIONS
P.O.BOX 6327
TALLAHASSEE FL 32314

RE: Bona Trans USA, Inc.
File # P00000042749

Dear Madam, Sir,

Along with this letter we are sending the 2001 Uniform Business Report (UBR)
for Bona Trans USA, Inc.

We apologize for the delay in filing the form. We thought that we had until 15th of May
to pay this fee.

We ask that, you accept this form together with the check for the amount of \$150.00
and respectfully request, that you wave any penalties.

Your cooperation in this matter will be gratefully appreciated.

Sincerely,

Zenon Obszanski
President