

FILED
Jun 11, 2002 8:00 am
Secretary of State

06-11-2002 90398 002 ***158.75

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

DOCUMENT # P-0000004 2752

1. Entity Name

CONEXIONES USA CORP.

DO NOT WRITE IN THIS SPACE

B0125049

2. Principal Place of Business

3900 ISLAND BLVD

3. Mailing Address

3900 ISLAND BLVD

Suite, Apt. #, etc.

B-302

Suite, Apt. #, etc.

B-302

City & State

AVENTURA

City & State

AVENTURA

4. FEI Number

651010879

☒ Applied For

☐ Not Applicable

DO NOT WRITE IN THIS SPACE

Zip

33160

Country

USA

Zip

33160

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name JAIRO LEZACA

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

3900 ISLAND BLVD

B-302

City AVENTURA

FL

Zip Code 33160

**DO NOT WRITE
IN THIS SPACE**

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 date 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) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$63.25

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 P=JAIRO LEZACA
NAME
STREET ADDRESS 3900 ISLAND BLVD B-302
CITY- ST- ZIP FL-33160

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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)(f), 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:

JAIRO LEZACA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4 May 31st (305) 9336831

Date Daytime Phone #

CR2ED045 (12/02)

Attachment
P# P00000042752
B0125049

May 28th, 2002


Secretary of Department
Division of Corporation
P.o.Box. 6327
Tallahassee, Fl. 32314

Attn: Reinstatements

The purpose of this communication is to inform you that unfortunately we did not receive the Annual Business Report as of 2002 pending to be filed prior May 30th of this Year. I would appreciate you consider this matter and not charge me for the late fee.

I am here enclosing the UBR form as well as US\$150.00 in order for you to reinstate my corporation. I would also appreciate if I may ask, that you send me a communication of such reinstatement or a certification of the Corporation for this year.

Yours Sincerely,


Jairo Lezaca
Conexiones USA Corp
P-00000042752