

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2003 8:00 am
Secretary of State

02-27-2003 90107 047 ***158.75

DOCUMENT # P00000049926

1. Entity Name
CARDENT USA, INC.



Principal Place of Business
**2822 NW 79TH AVE
MIAMI FL 33122**

Mailing Address
**2822 NW 79TH AVE
MIAMI FL 33122**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
1568 N.W. 89 COURT

3. Mailing Address
1568 N.W. 89 COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI, FL

MIAMI, FL

Zip **33172**

Country

Zip **33172**

Country

4. FEI Number **65-1070545**

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

**GRANDE, CARLOS
2822 NW 79TH AVE
MIAMI FL 33122**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **PD**
STREET ADDRESS **GRANDE, CARLOS**
CITY-ST-ZIP **2822 NW 79TH AVE
MIAMI FL 33122**

☐ Delete

TITLE
NAME
STREET ADDRESS **977 N.W. 106th AVE. CIRCLE**
CITY-ST-ZIP **MIAMI, FL. 33172**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME **S**
STREET ADDRESS **WY SOCKY, MARIA A.**
CITY-ST-ZIP **22251 TEMPO WAY
BOCA RATON, FL. 33428**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME **T**
STREET ADDRESS **GRANDE, JUAN CARLOS**
CITY-ST-ZIP **14 CHOWNINGS ST.
DURHAM, NC 27713**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME **D**
STREET ADDRESS **GRANDE, LUIS FERNANDO**
CITY-ST-ZIP **22251 TEMPO WAY
BOCA RATON, FL. 33428**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME **D**
STREET ADDRESS **GRANDE, CARLOS DANIEL**
CITY-ST-ZIP **10020 S.W. 125th AVE.
MIAMI, FL. 33185**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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: CARLOS GRANDE 2/24/03 305-994-8000

SIGNATURE REQUIRED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)