

FILED  
Apr 17, 2002 8:00 am  
Secretary of State

04-17-2002 90122 003 \*\*\*150.00

2002 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P000000054761

1. Entity Name

Solutech USA, Inc.

831248

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1200 Anastasia Avenue

Suite, Apt. #, etc.

440

City & State

Coral Gables Florida

Zip

33134

Country

3. Mailing Address

1200 Anastasia Avenue

Suite, Apt. #, etc.

440

City & State

Coral Gables, Florida

Zip

33134

Country

4. FEI Number

65-1014851

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Juan F. Villegas

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

1200 Anastasia Avenue

Suite # 440

City

Coral Gables

FL

Zip Code

33134

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 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)

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

PTSD  
Villegas, Juan F  
1200 Anastasia Ave. Suite # 440  
Coral Gables, FL 33134

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Juan Villegas

Date

Overtime Phone #

4/2/02 (305) 448-8070

CR2E034B (12/01)