

AMENDED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P000000 71092

1. Entity Name

USA EAGLE INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

777 N.E. 62nd. Street, Apartment C212
Miami, FL 33138

2. Principal Place of Business

777 N.E. 62nd street

3. Mailing Address

Same

Suite, Apt. #, etc.

Apartment C212

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Zip

33138

Country

Zip

Country

4. FEI Number

65-1054705

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Cediel, Carmen
9715 Arbor Oaks Ct. #208
Boca Raton, FL 33428

7. Name and Address of New Registered Agent

Name
Cediel, Carmen

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

9715 Arbor Oaks Ct, #208

City
Boca Raton

FL

Zip Code
33428

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

Cediel, Carmen Cediel, Carmen

11/22/01

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) ☒

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

TITLE
NAME Luis Orlando Ortega Sanabria
STREET ADDRESS Calle 7 #17-58
CITY-ST-ZIP Bogota, Colombia ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition
NAME Luis Orlando Ortega
STREET ADDRESS 9715 Arbor Oaks Ct. # 208
CITY-ST-ZIP Boca Raton, FL 33428

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
100004719691--9
-12/12/01--01008--006--
*****61-95 *****61-95

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

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 to this address, with all other like empowered.

SIGNATURE:

Luis Orlando Ortega Luis Orlando Ortega, President

11/22/01

Signature typed or printed name of signing officer or director

Date

Daytime Phone #

FILED

01 NOV 26 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)