

**2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000074300

1. Entity Name

GLOBAL EVENTS USA, INC.

**FILED**  
**Mar 14, 2001 8:00 am**  
**Secretary of State**

03-14-2001 90510 035 \*\*\*150.00

Principal Place of Business

Mailing Address

1201 HAYS STREET  
TALLAHASSEE FL 323011201 HAYS STREET  
TALLAHASSEE FL 32301

2. Principal Place of Business

2125 BISCAYNE BLVD

3. Mailing Address

2125 BISCAYNE BLVD

Suite, Apt. #, etc.

SUITE 580

Suite, Apt. #, etc.

SUITE 580

City &amp; State

MIAMI FL

City &amp; State

MIAMI FL

Zip

33137

Country

USA

Zip

33137

Country

USA

4. FEI Number

65-1044681

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name ANA M. GRANDIA RUIZ

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

2125 BISCAYNE BLVD

SUITE 580

City

MIAMI

FL

Zip Code

33137

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 ANA GRANDIA RUIZ

(NOTE: Registered Agent signature required when reinstating)

3-12-01

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 SECRETARY ☐ Delete  
NAME ANA GRANDIA RUIZ  
STREET ADDRESS 2125 BISCAYNE BLVD #580  
CITY-ST-ZIP MIAMI FL 33137TITLE PRESIDENT ☐ Delete  
NAME FERMIN PEREZ  
STREET ADDRESS 2125 BISCAYNE BLVD #580  
CITY-ST-ZIP MIAMI FL 33137TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

3-12-01

Date

(305) 205-7367

Daytime Phone #

CR2E034 (10/00)

0025051