2002 UNIFORM BUSINESS REPORT (UBR)

2002	2 UNIFORM BUS	SINESS REPO	RT (UBR)	FILED Fob 24, 2002 8:00 am
DOCUMENT # PO000090135 1. Entity Name VEARCO CORPORATION				Feb 24, 2002 8:00 am Secretary of State 02-24-2002 90064 045 ***150.00
Principal Place of Business ROTH. ROUSSO&DARRACH. P.A 3440 HOLLYWOOD BLVD STE 360 HOLLYWOOD FL 33021 Mailing Address ROTH. ROUSSO&DARRACH 3440 HOLLYWOOD BLVD STE 360 HOLLYWOOD FL 33021				
2. Principal P	Place of Business	3. Mailing Address		[1881/881 AN 8811: 8811 8811 8811 8811 8811 8811 88
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>	DO NOT WRITE IN THIS SPACE
City & State City & State		City & State		4. FEI Number 65-1046299 Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional
	6. Name and Address of Currer	nt Registered Agent		Fee Required
ROTH, LEONARDO A 3440 HOLLYWOOD BLVD., STE 310 HOLLYWOOD FL 33021			Street Addre	dress (P.O. Box Number is Not Acceptable) FL Zip Code
Tax filing	Signature, typed or printed name of registered age oration is eligible to satisfy its Intangila requirement and elects to do so.	nt and title if applicable. (NOTE:	Pegistered Agent signature re FEE IS \$150.00 Fee will be \$550.	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
11.	OFFICERS AN	D DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Cardelino, Oscar AV PAL LOS CORTIJOS DE L 2-A CARACAS VENEZULA	Delete DURDES PISCO OF 41	NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RODRIGUEZ, CARLOS AV PAL LOS CORTIJOS DE LO 2-A CARACAS VENEZULA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD JIMENEZ, ALBERTO AV PAL LOS CORTIJOS DE LO 2-A CARACAS VENEZULA	DURDES PISCO OF 41	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Provide the second seco	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	~ v V	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
13. I hereby of indicated of the correctanged,	certify that the information supplied wo on this report or supplemental repor- poration or the receiver or rustee and or on an attachment with an actures	th this filing does not qualify for the strue and accurate and that my powered to execute this report as with all other like empowered.	he exemption stated in signature shall have so required by Chapter	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information re the same legal effect as if made under oath; that I am an officer or director ter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 i

SIGNATURE: 坐