

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 05, 2002 8:00 am**  
**Secretary of State**

08-05-2002 90002 045 \*\*\*150.00

**DOCUMENT #** P00000092743

1. Entity Name

U.Q. TRANSMISSION INC. ✓

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

380 Payne Dr.

Suite, Apt. #, etc.

3. Mailing Address

380 Payne Dr.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami Springs, FL

Zip

33166

Country

USA

City & State

Miami Springs, FL

Zip

33166

Country

USA

4. FEI Number

65-1047012

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

Quintana, Ulises

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

380 Payne Dr.

City

Miami Springs

FL

Zip Code

33166

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 recreating)

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 \$81.25

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  
PD  
Quintana, Ulises  
380 Payne Dr.  
Miami Springs, FL 33166

TITLE  
NAME  
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CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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

Ulises Quintana, President

7/20/02

305-519-4336

Date

Daytime Phone #

CR2E034B (12/01)

Attachment

972405

U Q TRANSMISSION, INC.  
380 Payne Drive  
Miami Springs, Florida 33166

July 20, 2002

Florida Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

RE: Document #P00000092743  
2002 Uniform Business Report

Dear Sir or Madam:

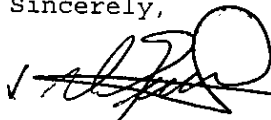
Enclosed please find our 2002 Uniform Business Report and our check for \$150.00 for the filing fee.

Please be advised that due to our change of address, we never received the 2002 Uniform Business Report in the mail. On this date, our accountant notified us that the report had not been filed and needed to be filed immediately.

Our new address is 380 Payne Dr., Miami Springs, FL 33166

We apologize for any inconvenience and thank you for your cooperation in this matter.

Sincerely,

  
Ulises Quintana