

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91382 043 ***150.00

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DOCUMENT # P00000093365

1. Entity Name
GERMANOS U.S.A., INC.



Principal Place of Business
1235 FAIRLAKE TERRACE
502
WESTON FL 33326

Mailing Address
1235 FAIRLAKE TERRACE
502
WESTON FL 33326



2. Principal Place of Business

1235 FAIRLAKE TERRACE #502

Suite, Apt. #, etc.

WESTON FLORIDA

City & State

33326

USA

3. Mailing Address

1235 FAIRLAKE TERRACE

Suite, Apt. #, etc.

WESTON FLORIDA

City & State

33326

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1062734**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOMEZ, GERARDO
1235 FAIRLAKE TRACE
UNIT 502
WESTON FL 33326

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
GOMEZ, GERARDO
1219 FAIRLAKE TRACE
WESTON FL 33326

☐ Delete

TITLE
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gerardo Gomez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-29-03

Date

754-234-3510

Daytime Phone #

CR2E034 (10/02)