

**02103**  
**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # P00000096147

1. Entity Name

STA AMERICA INC.



03 MAR 14 AM 9:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1580 SAWGRASS CORP. RW

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 130

City & State

City & State

SUNRISE, Florida

Zip

Country

Zip

Country

33323

USA

4. FEI Number

65-111579

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name JOSE TORRES

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

8100 NW 17 MANOR

City PLANTATION

FL

Zip Code

33322

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]*

JOSE TORRES, Director

2/20/2003

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	Ramon Sitocantes / President 8100 NW 17 MANOR PLANTATION, FL 33322	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Jose Torres / Director 8100 NW 17 MANOR PLANTATION, FL 33322	TITLE NAME STREET ADDRESS CITY - ST - ZIP	200013033362 03/14/03--01101--001 **50.00
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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 on an attachment with an address, with all other like empowerments.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE TORRES, Director

Date

Daytime Phone #

2/20/03

954-3154789

CR2E034B (12/02)

MIAMI



CARACAS

February 19, 2003

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

Dear Sir/Madam:

Please be informed that the Law Office of Rawny Garay, P.A. has been retained by STA America, Inc., in order to reinstate this for profit corporation. There have been no changes to the original Articles of Incorporation. Apparently the accountant who received the annual report failed to inform my client of the filing requirements and further did not produce the UBR upon my client's request. We ask that you please waive the late fees since my client was misled by their accountant.

Enclosed please find a check in the amount of \$300.00 reflecting the renewal fee and a fully executed UBR. Should you have any questions please feel to contact the undersigned.

With nothing further at this time, I remain,

Sincerely,

LAW OFFICES OF RAWNY GARAY, P.A.

Rawny Garay, Esq.