

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 24, 2002 8:00 am
Secretary of State

05-10-2002 90038 008 ***150.00

DOCUMENT # P00000102314

1. Entity Name

POWERNET R&D DIVISION INC.

Principal Place of Business

800 BRICKELL AVENUE, SUITE 900
MIAMI FL 33131

Mailing Address

800 BRICKELL AVENUE, SUITE 900
MIAMI FL 33131

94472



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

MIAMI

3. Mailing Address

SAME

Suite, Apt. #, etc.

901

Suite, Apt. #, etc.

SAME

City & State

MIAMI - FLORIDA

City & State

SAME

Zip

33131

Country

USA

Zip

Country

4. FEI Number

65-1052228

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OCAMPO, CARLOS A
800 BRICKELL AVENUE, SUITE 900
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

SAME

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

SAME

City

SAME

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

4-30-02

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, 2002 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 PD
NAME OCAMPO, CARLOS A
STREET ADDRESS 800 BRICKELL AVENUE, SUITE 900
CITY-ST-ZIP MIAMI FL 33131 ☐ Delete

TITLE SD
NAME DUMAS, PAUL
STREET ADDRESS 800 BRICKELL AVENUE, SUITE 900
CITY-ST-ZIP MIAMI FL 33131 ☐ Delete

TITLE YPD
NAME OCAMPO, TULO A
STREET ADDRESS 800 BRICKELL AVENUE, SUITE 900
CITY-ST-ZIP MIAMI FL 33131 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE TD
NAME MONICA EVERS
STREET ADDRESS 800 BRICKELL AVE., SUITE 901
CITY-ST-ZIP MIAMI, FL. 33131 ☐ Change ☒ Addition

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

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

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

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

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

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-02

Date

(305) 573-1117

Daytime Phone #

CH2E034 (9/01)