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

DOCUMENT # P00000106161

The state of the s

Southern Cross USA, Inc.



## FILED Jun 30, 2003 8:00 am Secretary of State

06-30-2003 90069 042 \*\*\*150.00

	/RITE			

2. Principal Place of Business 12710 SW 43rd Dr.	3. Mailing Address 12710 SW 43 DC
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 65-1102989 Miami, tl. Miami, Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired USA 33175 Fee Required

## DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent					
Name Fernando A. Lopez					
Street Address (P.O. Box Number is Not Agceptable)					

Trust Fund Contribution.

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.

TITLE

SIGNATURE . Signature, typed or printed name of registered agent and title if applicable. January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00

(NOTE: Registered Agent signature required when reinstating)

Miami

9. Election Campaign Financing

\$5.00 May Be Added to Fees

Amended UBR is \$61.25 Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. TITLE

Jorge de la Sovera NAME NAME 12770 SW 43rd Dr. STREET ADDRESS STREET ADDRESS Miami, Fl. 33175 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Fernando A. Lopez 12710 SW 437 Dr. NAME NAME STREET ADDRESS STREET ADDRESS Miami, F1. 33175 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE

> CITY-ST-ZIP TID F NAME STREET ADDRESS CITY-ST-ZIP TITLE

NAME

STREET ADDRESS

DO NOT WRITE

IN THIS SPACE

NAME STREET ADDRESS CITY-ST-ZIP TITLE

NAME STREET ADDRESS CITY-ST-ZIP

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 imported.

SIGNATURE:

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP TITLE

NAME

TITLE

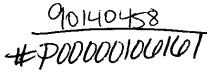
NAME

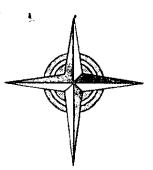
CITY-ST-ZIP

terna<u>ndo</u> SIGNATURE AND TYPED OR PRINTED NAME NING OFFICER OR DIRECTOR

CR2E034B (12/02)







SOUTHERN CROSS USA, INC.

METAL FABRICATION PIPE FITTERS MARINE REPAIRS BOILER MAKING DIESEL ENGINE REPAIRS

May 21st, 2003

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O.BOX 1500 TALLAHASSEE, FL. 32302-1500

Dear Sirs,

65-1102989

This is to advise that up to this time we have not received any advise from you regarding the renewal of my Corporation for the current year and we want to keep it active into your records, although practically our Corporation has not made business at all.

That is why I am sending you attached to this letter my check in the amount of \$150.00, because as far as I know this should have to be done by the current month of May each year.

Therefore, please renew my Corporation and confirm me accordingly.

Sincerely

Fernando A. Lopez Vice-President

FERNANDO A. LOPEZ V.P. Owners Representative 12710 S.W. 43 Dr. Miami, Florida 33175

PHONE: 305.221.1100 FAX: 305.221.4400 E-mail: scross@adinet.com.uy