

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

FILED
Jun 12, 2003 8:00 am
Secretary of State

06-12-2003 90010 013 ***158.75

DOCUMENT # *P00000112285* (2)

1. Entity Name

AMBIENTALTEC USA, INC
P00000112285



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5379 LYONS RD.

Suite, Apt. #, etc.

NO. 146

City & State

COCONUT CREEK, FL

Zip

33073

Country

USA

3. Mailing Address

5379 LYONS RD.

Suite, Apt. #, etc.

NO. 146

City & State

COCONUT CREEK, FL

Zip

33073

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1071096

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JORGE RIVADENEIRA

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

9000 NW 28TH DR APT 1-208

City

CORAL SPRINGS

FL

Zip Code

33065

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)

06/06/03

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
P	JORGE S RIVADENEIRA	9000 NW 28TH DR. 1-208	CORAL SPRINGS, FL 33065
T	TATIANA VILLANUEVA	5252 NW 51ST AVE	COCONUT CREEK, FL 33073

**DO NOT WRITE
IN THIS SPACE**

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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/06/03 (954)600-9791

Date

Daytime Phone #

CR2E034B (12/02)