

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

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90245 010 ***150.00

DOCUMENT # **P010000083603**
1. Entity Name
Pixelium Digital Imaging.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
12419 N.W. 7th Lane
Suite, Apt. #, etc.

3. Mailing Address
12419 N.W. 7th Lane
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami - FL.

City & State
Miami - FL.

4. FEI Number
65-107-3520

Applied For
Not Applicable

Zip
33182

Country
USA

Zip
33182

Country
USA

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1, May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY - ST - ZIP
**President
Jose Luis Grinovero
12419 N.W. 7th Lane
Miami FL. 33182**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Vice President
Mariana L. Tafura
12419 N.W. 7th Lane
Miami FL. 33182**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIANA TAFURA

4/23/02

Date

Daytime Phone #

305-225-3922

CR2E034B (12/01)