2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State
04-17-2002 90109 019 ***150.00

020203 AV

DOCUMENT # P01000008803

1. Entity Name
ANCLA INTERNATIONAL USA CORP.

Principal Place of Business	Mailing Address
~~10913 NW 30TH ST~~ ~~SUITE 100~~ ~~MIAMI FL 33172~~	~~10913 NW 30TH ST~~ ~~SUITE 100~~ ~~MIAMI FL 33172~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10925 NW. 27 ST	10925 NW. 27 ST
Suite, Apt. #, etc. 201	Suite, Apt. #, etc. 201
City & State Miami, FL	City & State Miami, FL.
Zip 33172 Country Dade	Zip 33172 Country Dade

4. FEI Number 65-1072240 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~LONDONO, PATRICIA~~ ~~10913 NW 30TH ST~~ ~~SUITE 100~~ ~~MIAMI FL 33172~~	Name LONDONO PATRICIA Street Address (P.O. Box Number is Not Acceptable) 10925 NW. 27 ST. # 201 City Miami FL Zip Code 33172-5009

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 _____ 03-15-02
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) ☐

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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LONDONO, PATRICIA ~~10913 NW 30TH ST~~ MIAMI FL 33172	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 10925 NW. 27 ST. -201
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ARIAS, GERMAN ~~10913 NW 30TH ST~~ MIAMI FL 33172	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 10925 NW. 27 ST. -201
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ARIAS, GUILLERMO ~~10913 NW 30TH ST~~ MIAMI FL 33172	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 10925 NW. 27 ST. #201
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/01)

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: _____ Pres. 03-15-02 (305) 463-727
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #