

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

**FILED**  
**Jul 22, 2002 8:00 am**  
**Secretary of State**

07-22-2002 90156 031 \*\*\*150.00

DOCUMENT # **P01000009613**

1. Entity Name

**PRIMAVERAL USA INC**

**DO NOT WRITE IN THIS SPACE**

**B0130509**

2. Principal Place of Business

**16510 SW 37 ST**

Suite, Apt. #, etc.

3. Mailing Address

**16510 SW 37 ST**

Suite, Apt. #, etc.

**DO NOT WRITE IN THIS SPACE**

City or State

**MIRAMAR FL**

City or State

**MIRAMAR FL**

4. FEI Number  
**65-1081143**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

**CASANAS CARLOS**

Street Address P.O. Box Number  
**16510 SW 37 ST**

City **MIRAMAR**

FL

ZIP **33027**

8. The above named entity submits this document for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature of Registered Agent or Officer or Director

**CARLOS CASANAS**

(If U.S. Registered Agent Signature Required when Filing)

**06/15/02**

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	<b>DPT</b>
NAME	<b>CASANAS, MARIA GLADYS</b>
STREET ADDRESS	<b>CALE 52 NORTE, No 3AB22</b>
CITY-STATE-ZIP	<b>CALI, COLOMBIA</b>
TITLE	<b>DS</b>
NAME	<b>CASANAS, FRANCISCO</b>
STREET ADDRESS	<b>CALE 52 NORTE NO 3AB22</b>
CITY-STATE-ZIP	<b>CALI, COLOMBIA</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
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CITY-STATE-ZIP	

**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 11(1)(7)(2)(b), 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. 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 or without other like empowered.

SIGNATURE:

**MARIA GLADYS CASANAS-PAES**

**06/15/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)

Attachment  
B0130509

# PRIMAVERAL USA, INC.

16510 SW 37 STREET  
MIRAMAR, FL 33027

June 15, 2002

Division of Corporations  
Uniform Business Report  
PO Box 1500  
Tallahassee, FL 32302-1500

RE: Document #P01000009613  
UBR - 2002


Dear Sir/Madam:

Enclosed, as per your instructions, is a Uniform Business Report with a check made payable to the Department of State in the amount of \$150.00.

As per our telephone conversation, please be advised that the reason we did not submit the Uniform Business Report on time was because we never received a notification and since this was our first year, we were unaware that payment in the amount of \$150.00 was to be made prior to May 1<sup>st</sup> in order to not incur penalty in the amount of \$400.00.

At this time we are kindly asking you to please accept the \$150.00 payment and waive the penalty.

Sincerely,

  
Maria Gladys Casanas  
President

Enclosure