

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State
 05-01-2002 91468 035 ***158.75

DOCUMENT # P01000011015

1. Entity Name

PEACH & HATTON INTERNATIONAL USA, INC.

Principal Place of Business

**1900 S HARBOR CITY BLVD. STE 321
 MELBOURNE FL 32901**

Mailing Address

**1900 S HARBOR CITY BLVD. STE 321
 MELBOURNE FL 32901**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3708141

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**KOSTRO, VICTOR S
 1825 RIVERVIEW DR
 MELBOURNE FL 32901**

7. Name and Address of New 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) ☐

**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

TITLE **D** ☐ Delete
 NAME **REUTER RAPP, ALBERT**
 STREET ADDRESS **56, JOHANNES MEYER**
 CITY-ST-ZIP **BOSSONIA, SOUTH AFRICA**

TITLE **D** ☒ Delete
 NAME **COX, RAY**
 STREET ADDRESS **131 CENTRAL RD**
 CITY-ST-ZIP **ATHOLHURST, SANDTON S AFRICA**

TITLE **D** ☐ Delete
 NAME **VAN DER MERWE, JOHANNES H. N.**
 STREET ADDRESS **23 DE MIST**
 CITY-ST-ZIP **WELGEMOED, SOUTH AFRICA**

TITLE **D** ☐ Delete
 NAME **ROXBY BROWN, MICHAEL**
 STREET ADDRESS **31 SPRINGSIDE DR, COWIES HILL**
 CITY-ST-ZIP **DURBAN, S AFRICA**

TITLE **D** ☐ Delete
 NAME **BINAI, EDWARD**
 STREET ADDRESS **540 E FRANKLYN AVE**
 CITY-ST-ZIP **INDIALANTIC FL 32903**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWARD BINAI

Pres

4-15-02

Date

321-308-0787

Daytime Phone #

CR2E034 (9/01)