

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State
 02-26-2002 90088 040 ***150.00

DOCUMENT # P01000020574

1. Entity Name
CLEVERNET USA, INC.

Principal Place of Business

**1800 W. 49TH STREET
 SUITE 301
 HIALEAH FL 33012**

Mailing Address

**2240 N.W. 87TH AVENUE
 SHIPNET 1-1103
 MIAMI FL 33172**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

301 EAST PINE ST.

Suite, Apt. #, etc.

150

3. Mailing Address

301 EAST PINE ST.

Suite, Apt. #, etc.

150

City & State

ORLANDO - Florida

Zip

32801

Country

USA

City & State

ORLANDO - FLORIDA

Zip

32801

Country

USA

4. FEI Number

80-0006233

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

RIOS, LEOPOLDO

1800 W. 49TH STREET

SUITE 301

HIALEAH FL 33012

7. Name and Address of New Registered Agent

Name

TANIA A. MAZZA-MARTINEZ

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

772 NW 42 AV. Suite 637

City

MIAMI

FL

Zip Code

33126

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 agent applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/6/02.-

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	PD	<input type="checkbox"/> Delete
NAME	RANGEL, MARIA G	
STREET ADDRESS	2240 N.W. 87TH AVENUE SHIPNET 1-1103	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE	VD	<input type="checkbox"/> Delete
NAME	LOPEZ, LUISA A	
STREET ADDRESS	2240 N.W. 87TH AVENUE SHIPNET 1-1103	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE	STD	<input type="checkbox"/> Delete
NAME	GOMEZ, JUAN C	
STREET ADDRESS	2240 N.W. 87TH AVENUE SHIPNET 1-1103	
CITY-ST-ZIP	MIAMI FL 33172	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MARIA GOMEZ		
STREET ADDRESS	301 EAST PINE ST. Suite 150		
CITY-ST-ZIP	ORLANDO, FL 32801		
TITLE	VD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LUISA ARTAVIA		
STREET ADDRESS	301 EAST PINE ST. Suite 150		
CITY-ST-ZIP	ORLANDO, FL 32801		
TITLE	STD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	JUAN C GOMEZ		
STREET ADDRESS	301 EAST PINE ST. Suite 150		
CITY-ST-ZIP	ORLANDO, FL 32801		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> 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:

LUISA A. ARTAVIA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/02 305-4465353

Date

Daytime Phone #

CR2E034 (9/01)