

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000047061

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: ACERBUS CORPORATION

Current Principal Place of Business:

1221 BRICKELL AVENUE SUITE 1100
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1221 BRICKELL AVENUE SUITE 1100
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-1102328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGRAMUNT, LUIS
1221 BRICKELL AVENUE SUITE 1100
MIAMI, FL 33131

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SAURA MAS, ANTONIO
Address: 1221 BRICKELL AVENUE SUITE 1100
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: SAURA SOTILLOS, JORGE A
Address: 1221 BRICKELL AVENUE SUITE 1100
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: SAURA SOTILLOS, LUCIA
Address: 1221 BRICKELL AVENUE SUITE 1100
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTONIO SAURA

D

04/30/2002

Electronic Signature of Signing Officer or Director

Date