

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

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91340 043 ***150.00

DOCUMENT # 701000054815

1. Entity Name

TOUAMA CORPORATION

DO NOT WRITE IN THIS SPACE

668907

2. Principal Place of Business

3440 HOLLYWOOD BLVD.

3. Mailing Address

3440 HOLLYWOOD BLVD

State, Apt. #, etc.

360

State, Apt. #, etc.

360

City & State

HOLLYWOOD, FL

City & State

HOLLYWOOD, FL

Zip

33021

Country

USA

Zip

33021

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1112157

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name LEONARDO A. ROTH

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

3440 HOLLYWOOD BLVD, STE 360

City HOLLYWOOD

FL

Zip Code 33021

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

LEONARDO A. ROTH

5-6-02

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when filing.)

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 \$250.00

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 D.P.T.
NAME CASAS, CARLOS ALBERTO
STREET ADDRESS 3440 HOLLYWOOD BLVD, STE 360
CITY-STATE-ZIP HOLLYWOOD, FL 33021

TITLE D.V.S.
NAME RAJNERMAN, SARA CLAUDIA
STREET ADDRESS 3440 HOLLYWOOD BLVD, STE 360
CITY-STATE-ZIP HOLLYWOOD, FL 33021

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**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 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 037, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

CARLOS ALBERTO CASAS, President

5-6-02

954-3224280

SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR

25M

System File #

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