

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 19, 2002 8:00 am
Secretary of State

08-19-2002 90138 005 ***158.75

DOCUMENT # P01000068795

1. Entity Name

GRACE KENNEDY FINANCIAL SERVICES (USA), INC.

Principal Place of Business

1650 SAWGRASS CORPORATE PKWY., STE. 475
 SAWGRASS FL 33326

Mailing Address

1650 SAWGRASS CORPORATE PKWY., STE. 475
 SAWGRASS FL 33326

2. Principal Place of Business

1560 SAWGRASS CORPORATE PKWY

3. Mailing Address

1560 SAWGRASS CORPORATE PKWY

Suite, Apt. #, etc.
 SUITE 490

Suite, Apt. #, etc.
 SUITE 490

City & State
 JUNKISE, FLORIDA

City & State
 JUNKISE, FLORIDA

Zip
 33323

Country
 USA

Zip
 33323

Country
 USA

4. FEI Number

65-1153691

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD.
1600 MIAMI CENTER (LAD)
MIAMI FL 33131

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **DIRECTOR** ☐ Delete
 NAME **DOUGLAS ORANE**
 STREET ADDRESS **2E ACADIA DR.**
 CITY-ST-ZIP **KINGSTON 8, JAMAICA**

TITLE **DIRECTOR** ☐ Delete
 NAME **GREGORY SOLOMON**
 STREET ADDRESS **10841 NW 12TH PLACE**
 CITY-ST-ZIP **FL 33322**

TITLE **DIRECTOR** ☐ Delete
 NAME **EDWARD ALEXANDER**
 STREET ADDRESS **827 NANDINA DRIVE**
 CITY-ST-ZIP **WESTON, FL 33327**

TITLE **DIRECTOR** ☐ Delete
 NAME **DONALD WEHBY**
 STREET ADDRESS **1 OAKRIDGE DR.**
 CITY-ST-ZIP **KINGSTON 8, JAMAICA**

TITLE **PAUCA DIRECTOR** ☐ Delete
 NAME **PAULA BARCLAY**
 STREET ADDRESS **4 OLIVER MEWS**
 CITY-ST-ZIP **KINGSTON 8, JAMAICA**

TITLE **OPERATIONS MANAGER** ☐ Delete
 NAME **PAUL SMITH**
 STREET ADDRESS **16337 SW 66TH ST.**
 CITY-ST-ZIP **MIAMI, FL 33193**

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

NAME
 STREET ADDRESS
 CITY-ST-ZIP

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NAME
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TITLE ☐ Change ☐ Addition

NAME
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 CITY-ST-ZIP

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:

PAUL SMITH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 15th 2002 954 331 4588

Date

Daytime Phone #

CR2E034 (4/02)



GRACE, KENNEDY FINANCIAL SERVICES (USA) INC.

1560 Sawgrass Corporate Parkway, 4th Floor
Sunrise, FL 33323, USA
Tel: (954) 331-4588 Fax: (954) 331-2680
www.gracekennedy.com

Uniform Business Reports
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

15 August 2002,

I am hereby enclosing completed 2002 Uniform Business Report Document and Citibank check # 17380 for the amount of \$ 158.75, representing payment for 2002 and request for certificate of status.

Kindly note that our offices did not receive the original notice sent out earlier this year, this could have been due to the fact that the company's mailing address is incorrect, on your records. The correct address is:

1560 Sawgrass Corporate Parkway
Suite 490
Sunrise, FL 33323

This is our first filing since incorporation. Now that we are aware of this annual requirement, we shall, in future contact your offices if the blank forms are not received by January of next year.

Yours Sincerely,

Grace, Kennedy Financial services (USA) Inc.


Paul Smith
Operations Manager