

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90237 038 ***150.00

DOCUMENT # P01000071249

1. Entity Name
MESON USA INC.

Principal Place of Business

**800 BRICKELL AVENUE
 SUITE 1115
 MIAMI FL 33131**

Mailing Address

**800 BRICKELL AVENUE
 SUITE 1115
 MIAMI FL 33131**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**OPPENHEIM, STEVEN P ESQ.
 800 BRICKELL AVENUE
 SUITE 1115
 MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name **OPPENHEIM, STEVEN**
 Street Address (P.O. Box Number is Not Acceptable)
**FIRST UNION BANK BUILDING
 800 BRICKELL AVE, STE 1115**
 City **MIAMI** FL **33131**

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 *Steven Oppenheim* **STEVEN OPPENHEIM** **4-25-02**
 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	<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	
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	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	OPPENHEIM, STEVEN
STREET ADDRESS	800 BRICKELL AVE, STE 1115
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DP PLOVESANA, GABRIELE
STREET ADDRESS	800 BRICKELL AVE, STE 1115
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D BIZZOTTO, FIDENZIO
STREET ADDRESS	4141 NE 2 AVENUE, STE 104
CITY-ST-ZIP	MIAMI, FL 33137
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: *Steven Oppenheim* **STEVEN OPPENHEIM** **4-26-02** **305-371-8555**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)