

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90087 016 ***158.75

DOCUMENT # P01000076910

1. Entity Name
TESSCO INTERNATIONAL CORP.

Principal Place of Business

**3065 NE 208 TERR
 MIAMI FL 33180**

Mailing Address

**3065 NE 208 TERR
 MIAMI FL 33180**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

8360 NW 34th Ave

City & State

Medley - Florida

Zip

33166-7450

Country

USA

Suite, Apt. #, etc.

8360 NW 34th Ave

City & State

Medley - Florida

Zip

33166-7450

Country

USA

4. FEI Number

65-1131322

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MAZZA-MARTINEZ, TANIA A
 782 NW 42 AVE STE 637
 MIAMI FL 33126**

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.

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
 NAME **CASTRO, EDUARDO D**
 STREET ADDRESS **3065 NE 208 TERR**
 CITY-ST-ZIP **MIAMI FL 33180**

TITLE **DP** ☒ Change ☐ Addition
 NAME **de Castro, Eduardo**
 STREET ADDRESS **1912 Timberline Rd.**
 CITY-ST-ZIP **Weston - Florida - 33327**

TITLE **D** ☐ Delete
 NAME **DUARTE, GUILLERMO**
 STREET ADDRESS **3065 NE 208 TERR**
 CITY-ST-ZIP **MIAMI FL 33180**

TITLE **D** ☒ Change ☐ Addition
 NAME **Duarte, Guillermo**
 STREET ADDRESS **3327 NE 208 terrace**
 CITY-ST-ZIP **Aventura, FL 33180**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Delete
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 STREET ADDRESS
 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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/24/02
 Date

(305) 882-8120
 Daytime Phone #

CR2E034 (9/01)