FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

SIGNATURE:

1. Entity Name

P01000091580

P0100009#580

CleverNet America Corporation

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1580 Sawgrass Corporate Parkway

Suite, Apt. #, etc.
Suite 130

Ciby & State

FILED Feb 18, 2003 8:00 am Secretary of State

02-18-2003 90114 003 ***150.00

O # O F O O O O O

DO NOT WRITE IN THIS SPACE

954) 659 9066

Daytime Phone #

04-29-2002

Suite	130					Applied For	
City & State Sunrise, Florida		City & State Sunrise, Florida		4. FEI Number 80-0006233		Not Applicable	
Zip 33323	Countr Broward	Zip 33323	CountBroward	5. Certificate of Status		8.75 Additional e Required	
33323				7. Name and Address of	of Current Registered A	gent	
-			Tania Mazz	a-Martinez			
	NOTAL		1		A a a prioble V		
	-DO-NOT-W	KITE	Street Address	s (P.O. Box Number is Not A	Acceptable)		
	IN THIS SP	ACE	780 NW. 4	780 NW. 42 Ave. Suite 420			
			City Mia	ımi,	FL	233126	
			d effice or rogic	torod agent, or both, in the	State of Florida.		
The above name	ed entity submits this statement for	the purpose of changing	g its registered office or regis	tered agent, or both, in the	o,alo o mana		
,						_	
IGNATURE	ture, typed or printed name of registered agent a	and title if applicable.	(NOTE: Registered Agent signature requ	ired when reinstating)	DATE		
Signat	ture, typed or printed name of registered agent a		- May 1 Fee is \$150.00				
). This corporation is eligible to satisfy its intangible After May 1			Viav 1, Fee is \$550.00	e is \$550.00			
Tax filing requir	rement and elects to do so.	Amer	nded UBR is \$61.25		Contribution.	Added to Fees	
(See criteria on			ayable to Department of S	itate		<u> </u>	
1.	OFFICERS AND	DIRECTORS					
TLE	President		TITLE				
AME	Juan Carlos Gomez	NAME					
REET ADDRESS	277 Cameron Drive	STREET ADDRESS			•		
ITY-ST-ZIP	Weston, FL 33326		CITY-ST-ZIP				
ITLE	Director		TITLE				
AME	Maria de Los Angeles C	NAME					
TREET ADDRESS	301 E. Pine St.		STREET ADDRESS	*			
ITY-ST-ZIP	Ortando, FL 32801		CITY-ST-ZIP				
	Director		TITLE				
ITLE	Juan Carlos Gomez Ra	ingel	NAME	*			
IAME	277 Cameron Drive		STREET ADDRESS	DO I	NOT WRI	TF	
STREET ADDRESS	Weston, FL 33326		CITY-ST-ZIP		401-44171	I then	
+			TITLE	INI T	HIS SPAC	`E	
TTLE			NAME	114 1		/ h	
NAME			STREET ADDRESS				
STREET ADDRESS			CITY-ST-ZIP				
HTY-ST-ZIP			TIFLE				
TITLE			NAME				
IAME			STREET ADDRESS	•			
STREET ADDRESS	_		CITY-ST-ZIP	*			
CITY-ST-ZIP							
TITLE			TITLE	-			
NAME .			NAME STREET ADDRESS				
STREET ADDRESS			CITY-ST-ZIP				
CITY-ST-ZIP				in Continu 110 07/3\(i) Elect	ida Statutes. I further cer	tify that the information	
13. I hereby cert	ify that the information supplied withis report or supplemental report	th this filing does not qua	ality for the exemption stated i I that my signature shall have	the same legal effect as if I	made under oath; that I a	am an officer or direct	
indicated on of the corner	this report or supplemental report ration or the receiver or frustee en with an address, with all other like or	powered to execute this	report as required by Chap	ier 607, Florida Statutes; an	d that my name appear	SILIDIOUK LI OLOHAN	
attachment w	vith an address, with all other like e	empowered.			_		

JUAN CARLOS GOMEZ

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

January 17, 2003

CLEVERNET AMERICA, CORP. 1580 SAWGRASS CORPORATE PARKWAY **SUITE 130** SUNRISE, FL 33323

SUBJECT: CLEVERNET AMERICA, CORP. Ref. Number: P01000091580

We have received your document for CLEVERNET AMERICA, CORP. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Your check for 150.00 is out dated after six months. Please submit current check for \$150.00.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Letter Number: 603A00002236 :

Eula Peterson **Document Specialist**