

2002


103

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 MAR 10 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000100640 1. Entity Name Codmatel USA Inc.	
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DO NOT WRITE IN THIS SPACE

700013988447
03/12/03--01001--020 **300.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 100 Hough Drive Suite, Apt. #, etc.	3. Mailing Address Same Suite, Apt. #, etc.
City & State Miami Springs, FL	City & State
Zip 33166	Country

4. FEI Number 65-1146550	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent	
Name Jaime F. Batallas	
Street Address (P.O. Box Number is Not Acceptable) 100 Hough Drive	
City Miami Springs	Zip Code FL 33166

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  DATE _____

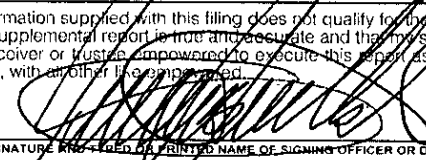
Signature, type or print name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating!

January 1 - May 1 Fee is \$750.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jaime F. Batallas, PD 100 Hough Drive Miami Springs, FL 33166	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. 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 10 or on an attachment with an address, with another like company.

SIGNATURE:  DATE _____ Daytime Phone # _____

SIGNATURE AND FILED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

28 2/10

Attachment



RAUL RICARDO JR.
CERTIFIED PUBLIC ACCOUNTANT

March 4, 2003

Uniform Business Report
Division of Corporation
P.O. Box 1500
Tallahassee, Florida 32302-1500

Ref: Codmatel USA Inc.
Document # P01000100640

To Whom It May Concern:

Please be advised that the above-mentioned Corporation never received their UBR (Uniform Business Report) form for 2002 & 2003.

We are requesting that you waive the late fees and accept the enclosed downloaded forms from your website (completely filled in for 2002 and 2003) along with a check in the amount of \$300 to cover for the initial renewal charges. Please change my client's status from Administratively Dissolved to Active as soon as possible.

If you have any questions, please feel free to contact me at my office number listed below.

Sincerely,

Raul Ricardo, C.P.A.
Lic. # AC0013416