

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 08, 2002 8:00 am**  
**Secretary of State**

0205114  
 AV

**DOCUMENT # P01000102260**

1. Entity Name

**PROIPLAST, INC.**

04-08-2002 90064 002 \*\*\*158.75

Principal Place of Business

**701 BRICKELL AVENUE, SUITE 3000  
 MIAMI FL 33131**

Mailing Address

**701 BRICKELL AVENUE, SUITE 3000  
 MIAMI FL 33131**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**4775 N.W. 72ND AVE.**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**MIAMI, FL**

City & State

4. FEI Number

**65-1149234**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**TRASTATE REGISTERED AGENT CORPORATION  
 701 BRICKELL AVENUE, SUITE 3000  
 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

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 **Mercado, Erich Fischer**  
 STREET ADDRESS **701 Brickell Ave, Ste 3000**  
 CITY-ST-ZIP **Miami, Fl 33131**

TITLE **DVP** ☐ Delete  
 NAME **Albuquerque, Ewaldo Fischer**  
 STREET ADDRESS **701 Brickell Ave, Ste 3000**  
 CITY-ST-ZIP **Miami, Fl 33131**

TITLE **S** ☐ Delete  
 NAME **Castedo, Javier**  
 STREET ADDRESS **701 Brickell Ave, Ste 3000**  
 CITY-ST-ZIP **Miami, Fl 33131**

TITLE ☐ Delete  
 NAME \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_  
 CITY-ST-ZIP \_\_\_\_\_

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TITLE ☐ Change ☐ Addition

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 STREET ADDRESS \_\_\_\_\_  
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TITLE ☒ Change ☐ Addition

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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: Erich Y. Fischer** **ERICH FISCHER Mercado** **MARCH 20<sup>th</sup> 2002** **(305) 331 6407**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)