

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90194 040 ***150.00

DOCUMENT # P01000105247

1. Entity Name
SCORPION USA TRADING, INC.



Principal Place of Business
7563 N.W. 70TH STREET
MIAMI FL 33166

Mailing Address
7563 N.W. 70TH STREET
MIAMI FL 33166

2. Principal Place of Business

9042 S.W. 142 AVE

3. Mailing Address

9042 S.W. 142 AVENUE

Suite, Apt. #, etc.

210

Suite, Apt. #, etc.

210

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

Zip

33186

Country

MIAMI-DADE

Zip

33186

Country

MIAMI-DADE

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1151653

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JARAMILLO, MONICA
7563 N.W. 70TH STREET
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

JARAMILLO, MONICA

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

9042 SW 142 AVENUE #210

City

MIAMI FLORIDA

FL

Zip Code

33186

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

Monica Jaramillo A.

03-31-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **JARAMILLO, MONICA**
STREET ADDRESS **7563 N.W. 70TH STREET**
CITY-ST-ZIP **MIAMI FL 33166**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Monica Jaramillo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-31-03

Date

305-408-2846

Daytime Phone #

CR2E034 (10/02)