

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2003 8:00 am
Secretary of State

05-28-2003 90116 019 ***150.00

DOCUMENT # P02000018894

1. Entity Name
CONSCAL USA CORPORATION



Principal Place of Business
C/O BRATTER KRIEGER, LLP
777 17TH STREET, PH
MIAMI BEACH, FL 33139

Mailing Address
C/O BRATTER KRIEGER, LLP
777 17TH STREET, PH
MIAMI BEACH, FL 33139

2. Principal Place of Business
13880 SW 139th Ct.

3. Mailing Address
13880 SW 139th Ct.

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number
02-0564751

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

Zip
33186

Country
USA

Zip
33186

Country
USA

6. Name and Address of Current Registered Agent
CIFUENTES, MARIA C
C/O BRATTER KRIEGER, LLP
777 17TH STREET, PH
MIAMI, FL 33139

7. Name and Address of New Registered Agent
Name
Guido ARROYO MAYORI

Street Address (P.O. Box Number Is Not Acceptable)
10819 SW 147 Ct.

City
Miami

FL

Zip Code
33196

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 *[Signature]* (NOTE: Registered Agent Signature required when resigning)

DATE

FILE NOW WITH 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 NAME STREET ADDRESS CITY-ST-ZIP	D VEGA DE ARROYO, MARLEN 777 17TH STREET, PH MIAMI BEACH, FL 33139 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Vega De Arroyo, Marlen 10819 SW 147 Ct. MIAMI, FL 33196 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARROYO MAYORI, GUIDO GERMAN 777 17TH STREET, PH MIAMI BEACH, FL 33139 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARROYO MAYORI, Guido 10819 SW 147 Ct. MIAMI, FL 33196 ☒ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: *[Signature]* 5/23/03 (305)383-8341

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)