

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91181 010 ***150.00

0239061 AV

DOCUMENT # P02000019678

1. Entity Name
USA INTERNATIONAL BUSINESS CORP.



Principal Place of Business
**1340 LINCOLN RD APT. 205
MIAMI FL 33139**

Mailing Address
**1340 LINCOLN RD APT. 205
MIAMI FL 33139**

2. Principal Place of Business
8066 NW 10 STREET
Suite, Apt. #, etc. **2**

3. Mailing Address
8066 NW 10 STREET
Suite, Apt. #, etc. **2**

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
03-0391613

Applied For
☐ Not Applicable

Zip
33126

Country
USA

Zip
33126

Country
USA

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

**UEUNTEN, SHITOKU
1340 LINCOLN RD APT. 205
MIAMI FL 33139**

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-31-03

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 **UEUNTEN, SHITOKU**
STREET ADDRESS **1340 LINCOLN RD APT. 205**
CITY-ST-ZIP **MIAMI FL 33139**

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

TITLE **VD** ☐ Delete
NAME **YAMAKAWA, FELIX**
STREET ADDRESS **1340 LINCOLN RD APT. 205**
CITY-ST-ZIP **MIAMI FL 33139**

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

TITLE **VD** ☐ Delete
NAME **YAMAKAWA, ROSSANA**
STREET ADDRESS **1340 LINCOLN RD APT. 205**
CITY-ST-ZIP **MIAMI FL 33139**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-31-03

Date

Daytime Phone #

CR2E034 (10/02)