

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90134 021 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000059024

1. Entity Name
HERALPIN USA, INC.



Principal Place of Business
6995 NW 82ND AVE.
BAY 43
MIAMI, FL 33166

Mailing Address
6995 NW 82ND AVE.
BAY 43
MIAMI, FL 33166

11029680



2. Principal Place of Business
1925 BRICKEL AVENUE

3. Mailing Address
1925 BRICKEL AVENUE

☐ CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc.
SUITE #D-205

Suite, Apt. #, etc.
SUITE #D-205

City & State
Miami Florida

City & State
Miami Florida

4. FEI Number
01-0704732

Applied For
Not Applicable

Zip
33129

Country
DADE

Zip
33129

Country
DADE

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

6. Name and Address of Current Registered Agent

BETANCOURT, JOSE R
6995 NW 82ND AVE.
BAY 43
MIAMI, FL 33166

7. Name and Address of New Registered Agent

Name
JOSE R. BETANCOURT
Street Address (P.O. Box Number is Not Acceptable)
1925 BRICKEL AVENUE
SUITE #D-205
City
Miami FL Zip Code
33129

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

(NOTE: Registered Agent's signature required when reinstating)

3/24/03
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
BETANCOURT, JOSE R
6995 NW 82ND AVE. BAY 43
MIAMI, FL 33166 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
JOSE R. BETANCOURT
1925 BRICKEL AVENUE #D-205
MIAMI, FLORIDA 33129 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ALANZO ALVAREZ
1925 BRICKEL AVENUE #D-205
MIAMI, FLORIDA 33129 ☒ Change ☒ Addition

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

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

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

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 checks empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/03

Date

Daytime Phone #

CR2E034 (10/02)