

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

FILED

04 JAN -6 PM 2:59

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P02000092488

1. Entity Name

BULL POWER USA, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10112 Costa del Sol Blvd.

3. Mailing Address

10112 Costa del Sol Blvd.

REINSTATEMENT 03

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

Applied For

Not Applicable

Zip

33178

Country

USA

Zip

33178

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **Feroze Ali**

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

10112 Costa del Sol Blvd.

City **Miami**

FL

Zip Code

33178

**DO NOT WRITE
IN THIS SPACE**

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 **Feroze Ali, VP**

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

(NOTE: Registered Agent signature required when reinstating)

12-29-03

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 **P**
NAME **Susan D. Ali**
STREET ADDRESS **10112 Costa del Sol Blvd.**
CITY-ST-ZIP **Miami, FL 33178**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
300026172203
01/06/04--01068--003 **150.00

TITLE **VP**
NAME **Feroze Ali**
STREET ADDRESS **10112 Costa del Sol Blvd.**
CITY-ST-ZIP **Miami, FL 33178**

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feroze Ali 12-29-03

Date

Daytime Phone #

CR2E034B (12/02)

BULL POWER USA, INC.

10112 COSTA DEL SOL BLVD. MIAMI, FL 33178

December 29, 2003

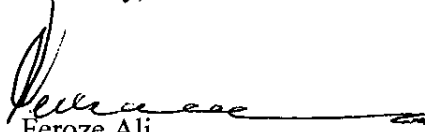
Andy Dunlap
Florida Department of State
Uniform Business Report Filings
PO BOX-1500
Tallahassee, FL 32302

Dear Mr. Dunlap:

As per our telephone conversation I am sending you this letter regarding the UBR that my company, Bull Power USA, Inc. never received. I am sending you the completed and signed report with the required fee of \$150.00.

I thank you for handling this matter. Should you have any questions or concerns please direct them to the address above.

Sincerely,


Feroze Ali
Vice President