## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## P02000094675 **DOCUMENT #**

1. Entity Name
THE NINJA CORPORATION USA



**FILED** Feb 12, 2003 8:00 am Secretary of State

02-12-2003 90132 023 \*\*\*150.00

:				
Principal Place of Business 9834 ROCKY BANK DR NAPLES FL 34109	Mailing Address 9834 ROCKY BANK DR NAPLES FL 34109	-	E CONSTANT ROSSO STANT AND	
2. Principal Place of Business	3. Mailing Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	· .	CHECK HERE IF MAKING CHANGES	
City & State	City & State		4. FEI Number 81 - 0581480   Applied For   Not Applicable	
Zip Country	Zip	Cotintry	5. Certificate of Status Desired - \$8.75, Additional, Fee Required	
6. Name and Address of C	urrent Registered Agent	-	7. Name and Address of New Registered Agent	
CORPORATE INTERNATIONAL REGISTERED AGENTS, INC. 200 S BISCAYNE BLVD, 43RD FLOOR		Name	¥	
		-Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33131	•	City	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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00

DATE

Trust Fund Contribution.

9. Election Campaign Financing 

\$5.00 May Be Added to Fees

Make Check			
10. OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete BAXTER, DEE ST MICHAELS INDUSTRIAL ESTATE/TOPAZ HOUSE WIDNESS CHESHIRE WA8 -8TL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete BRERETON, ANTHONY ST MICHAELS INDUSTRIAL ESTATE/TOPAZ HOUSE WIDNESS CHESHIRE WAS -8TL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	J ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	. Change Addition
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:

