

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 14, 2003 8:00 am
Secretary of State

04-28-2003 90963 025 ***150.00
07-14-2003 90329 046 *****8.75

DOCUMENT # P02000107731

1. Entity Name
KAMIKAZE PILOT MOTORCYCLE CORP.



Principal Place of Business
**245 SE 1ST STREET, SUITE 321
MIAMI FL 33131**

Mailing Address
**245 SE 1ST STREET, SUITE 321
MIAMI FL 33131**

2. Principal Place of Business
3847 NE 168 STREET

3. Mailing Address
P.O. BOX 600128

Suite, Apt. #, etc.
2C

Suite, Apt. #, etc.

City & State
N MIAMI BCH FL

City & State
NORTH MIAMI BCH, FL

4. FEI Number
05-0576842

Applied For
Not Applicable

Zip
33160

Country
USA

Zip
33160

Country
U.S.A.

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

6. Name and Address of Current Registered Agent

SALGADO JR, SILVIO
3847 NE 168 STREET # 2C
NORTH MIAMI BEACH FL 33160

7. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

07/09/03

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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
DE AGUILAR, FLAVIA V
3847 NE 168 STREET # 2C
NORTH MIAMI BEACH FL 33160** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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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 ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

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

07/09/03

305-491-9029

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

4/28/2003-90963-025-\$150.00-\$150.00

4

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

DOCUMENT #

P02000107731

1. Entity Name

KAMIKAZE PILOT MOTORCYCLE CORP.



10109903

Principal Place of Business
245 SE 1ST STREET, SUITE 321
MIAMI FL 33131Mailing Address
245 SE 1ST STREET, SUITE 321
MIAMI FL 33131

2. Principal Place of Business

P.O. Box 600128

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 600128

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

North Miami Beach, FL

City & State

N Miami Beach, FL

4. FEI Number

Applied for

Not Applicable

Zip
33160Country
USAZip
33160Country
USA

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

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(NOTE: Registered Agent signature required when requesting)

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
DE AGUILAR, FLAVIA V
3847 NE 168 STREET # 2C
NORTH MIAMI BEACH FL 33160☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
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CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
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☐ DeleteTITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)