

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000120159

1. Entity Name

CAPIXABA CORPORATION

FILED

03 OCT -3 AM 9:24

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

Mailing Address

223 RIVIERA CIRCLE

223 RIVIERA CIRCLE

WESTON FL 33326

WESTON FL 33326

2. Principal Place of Business

2645 EXECUTIVE PARK DR

3. Mailing Address

2645 EXECUTIVE PARK DR

Suite Apt. #, etc.

146

Suite Apt. #, etc.

146

City & State

WESTON FL

City & State

WESTON FL

Zip

33331

Country

Zip

33331

Country

4. FEI Number

71-0912548

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TAX HOUSE CORPORATION

3929 N. FEDERAL HWY

POMPANO BEACH FL 33064

7. Name and Address of New Registered Agent

Name

CARLOS L. REIS

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

9999 SUMMERBREEZE DR #316

City

SUNRISE

FL

Zip Code

33322

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.

SIGNATURE Carlos Reis DATE 09/25/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW! FEE IS \$150.00

**After MAY 1, 2003 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P REIS, CARLOS L**
STREET ADDRESS **223 RIVERA CIRCLE**
CITY-ST-ZIP **WESTON FL 33326**

12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **REIS, CARLOS L**
STREET ADDRESS **9999 SUMMERBREEZE DR #316**
CITY-ST-ZIP **SUNRISE, FL 33322**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
500023545255
10/03/03--01058--014 **150.00

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 11 or Block 12 N changed or on an attachment with an address, with all other the empowered.

SIGNATURE Carlos Reis **CARLOS L. REIS - PRESIDENT** **09/25/03** **(954) 816-7878**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FLORIDA DEPARTMENT OF STATE
Division of Corporation
2003 Uniform Business Report (UBR)
P.O. BOX 6327
Tallahassee, FL 32314

Re: *Filing of Uniform Business Report 2003*
P02000120159
CAPIXABA CORPORATION

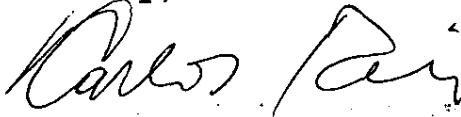
To Whom It May Concern:

This letter is to inform you that we have never received a Uniform Business Report form by the mail.

We would like to request you that you forgive all extra fees and penalties other than the primary of \$150.00 and accept the filling of our attached UBR, which has been prepared by our accountant.

Any questions or concern, feel free to contact our accountant at (954) 782-4000 and speak to Mr. Breno Gomes.

Sincerely,



CARLOS L. REIS - President
CAPIXABA CORPORATION
2645 Executive Park Dr Ste 146
Weston, FL 33331