

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2006 8:00 am
Secretary of State

02-23-2006 90015 037 ***150.00

DOCUMENT # P04000030839 1. Entity Name MERCAPAVA USA, INC.																																
Principal Place of Business 620 NE. 58TH STREET OAKLAND PARK, FL 33334			Mailing Address 620 NE. 58TH STREET OAKLAND PARK, FL 33334																													
2. Filing Office Address 6116 SE. 122 LANE BELLEVIEW, FL 34420		3. Mailing Address 6116 SE. 122 LANE BELLEVIEW, FL 34420		02162006 Chg-P CR2E034 (11/05)																												
Zip Country _____		Zip Country _____		4. FEI Number 81-0643614																												
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable																												
6. Name and Address of Current Registered Agent PAVA, FABIO 620 NE. 58TH STREET OAKLAND PARK, FL 33334			7. Name and Address of New Registered Agent Name PAVA, FABIO Street 6116 SE. 122 LANE City BELLEVIEW, FL 34420 State 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 <u><i>FABIO PAVA</i></u> AGENT DATE <u>2/16/06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)																																
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		10. OFFICERS AND DIRECTORS																												
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u><i>FABIO PAVA</i></u> PRESIDENT				Date <u>2/16/06</u> Daytime Phone # _____																												