

2008 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000106840

1. Entity Name
URBIS USA, INC.



Principal Place of Business

200 SOUTH BISCAYNE BLVD 6TH FLOOR
MIAMI, FL 33131

Mailing Address

200 SOUTH BISCAYNE BLVD 6TH FLOOR
MIAMI, FL 33131



01142008 No Chg-P CR2E034 (11/05)

4. FEI Number
81-0676757

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

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE, SUITE 3000
MIAMI, FL 33131

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DVP
NAME ACORDAGOICOCHEA, ALFONSO EGUIA
STREET ADDRESS CALLE GENERAL PARDINAS, 73
CITY-ST-ZIP 28006-MADRID, SPAIN, XX XXXX

TITLE DP
NAME MOIX, JORDI
STREET ADDRESS CALLE GENERAL PARDINAS, 73
CITY-ST-ZIP 28006-MADRID, SPAIN, XX XXX

TITLE DTS
NAME CUERVO, ANGEL
STREET ADDRESS CALLE GENERAL PARDINAS, 73
CITY-ST-ZIP 28006-MADRID, SPAIN, XX XXX

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000829977
02/26/08-80064-012 150.00

**DO NOT WRITE
IN THIS SPACE**

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: ✓

JORDI MOIX

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 21, 2008 1434 902.900.400
Date Daytime Phone #