2009

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P07000123222

1. Entity Name

Trick Engineering U.S.A. Corp.

DO NOT WRITE IN THIS SPACE

FILED

09 JUN -3 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600156723596
06/03/09--01018--013 **150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Calle 11, Los Palos Grandes	3602 Bridgewood Dr.
Suite, Apt. #, etc.: Quinta Radar	Suite, Apt. #, etc.:
City & State: Caracas	City & State: Boca Raton, FL
Zip: 1063 Country: Venezuela	Zip: 33434 Country: USA

4. FEI Number: 26-1408534 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: del Valle, Manuel R.

Street Address (P.O. Box Number is Not Acceptable): 7300 N.W. 19th St.

Suite 101

City: Miami **FL** Zip Code: 33126-1222

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

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	D/P/S/T	TITLE	
NAME	Mancera, Enrique J.	NAME	
STREET ADDRESS	Calle 11, Los Palos Grandes	STREET ADDRESS	
CITY - ST - ZIP	Caracas, Venezuela 1063	CITY - ST - ZIP	
TITLE		TITLE	
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CR2E034B (12/02)

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 on an attachment with an address, all other like empowered.

SIGNATURE: _____ Enrique J. Mancera 04/20/2009 011-58-212-263-7525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

STF FL323B1F.1