

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P15740

1. Entity Name
STOCKS & STOCKS (U.S.A.), INC.

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90363 002 ***158.75

Principal Place of Business

**3301 CORAL WAY
BOX 45
MIAMI FL 33145**

Mailing Address

**3301 CORAL WAY
BOX 45
MIAMI FL 33145**

00000132



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3800 N.W. 32nd AVE
Suite, Apt. #, etc.

3. Mailing Address

2951 Virginia ST
Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami FL

4. FEI Number

**70-0102994
59-2802953**

Applied For

Not Applicable

Zip

Country

33142

Zip

Country

33133

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RICHARD J. LEE P.A.
2655 LE JEUNE RD.
5TH FLOOR
CORAL GABLES FL 33134**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PDT**
STREET ADDRESS **PORTEOUS, SIMON**
CITY-ST-ZIP **3301 CORAL WAY BOX 45
MIAMI FL**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2951 Virginia ST**
CITY-ST-ZIP **Miami FL 33133**

TITLE ☐ Delete
NAME **SD**
STREET ADDRESS **BASS, SHERRI**
CITY-ST-ZIP **3301 CORAL WAY
MIAMI FL**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2951 Virginia ST**
CITY-ST-ZIP **Miami FL 33133**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Sherrri Bass** **SHERRI BASS**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01 **305 441-0952**
Date Daytime Phone #

CR2E034 (10/00)