## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 19, 2001 8:00 am Secretary of State DOCUMENT # P92000002183 1. Entity Name DARCY PROPERTIES, INC. 04-19-2001 90015 035 \*\*\*150.00 Principal Place of Business Mailing Address 2372 NW 34TH RD 2372 NW 34TH RD COCONUT CREEK FL 33066 COCONUT CREEK FL 33066 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0366815 Not Applicable Country Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ALMEIDA, DEBORA Street Address (P.O. Box Number is Not Acceptable) 2372 NW 34TH RD **COCONUT CREEK FL 33066** Zip Code City 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE VIEIRA, CARLOS A NAME 1001 5TH AVE, #22C STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **NEW YORK NY** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE PUGA, JOAO I NAME STREET ADDRESS STREET ADDRESS RUA MARANHAO, 949 5 ANDAR CITY-ST-ZIP CITY-ST-7IP HIGIENOPOLIS SAO PAULO Delete Delete ☐ Change = Addition TITLE TITLE PUGA. ALEXANDRE A I NAME NAME STREET ADDRESS 20185 E COUNTRY CLUB DR, #T54 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NORTH MIAMI BEACH FL TITI F ☐ Change ☐ Addition TITLE ☐ Delete ALMEIDA, DEBORA NAME NAME STREET ADDRESS STREET ADDRESS 2372 NW 34TH RD CITY-ST-ZIP CITY-ST-ZIP COCONUT CREEK FL Change Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR