

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000086093

1. Entity Name

OCEANCO (USA) INCORPORATED

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90045 033 ***150.00

Principal Place of Business

Mailing Address

1650 SE 17TH STREET
SUITE 200
FT. LAUDERDALE FL 33316
US

C/O HOLLAND & KNIGHT
701 BRICKELL AVENUE
MIAMI FL 33131-2813
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0454550

Applied For

Not Applicable

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

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE, STE 3000
MIAMI FL 33131

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, 2000 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
NAME DVAS
STREET ADDRESS HAGEN, STEVEN H
CITY-ST-ZIP 701 BRICKELL AVENUE
MIAMI FL

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

TITLE
NAME S
STREET ADDRESS TMONSALVATGE, GECFFREY
CITY-ST-ZIP 1650 SE 17TH ST. #200
FT LAUDERDALE FL 33316

TITLE
NAME S
STREET ADDRESS MONSALVATAGE, GEOFFREY
CITY-ST-ZIP 1650 S.E. 17TH ST. #200
FT. LAUDERDALE, FL 33316 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven H. Hagen

3/20/00

Date

305-789-7758

Daytime Phone #

CR2F034 (9/99)