

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90058 027 ***158.75

DOCUMENT # P95000090380

1. Entity Name

SA Consulting, Inc.

Principal Place of Business

Mailing Address

2121 Ponce De Leon Boulevard
 Suite 620
 Coral Gables, Florida 33134

770777

2. Principal Place of Business

3. Mailing Address

2121 Ponce De Leon Blvd. 2121 Ponce De Leon Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

620

620

City & State

City & State

Coral Gables, FL

Coral Gables, FL

Zip

Country

Zip

Country

33134

Dade

33134

Dade

4. FEI Number

650645936

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

7. Name and Address of New Registered Agent

Silva, Sergio E.
 2121 Ponce De Leon Boulevard
 Suite 620
 Coral Gables, FL 33134

Name

Silva, Sergio E.

Street Address (P.O. Box Number is Not Acceptable)

2121 Ponce De Leon Blvd., Ste 620
 City Coral Gables, FL Zip Code 33134

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

Sergio Silva

DIRECTOR

4/27/01

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! FEES \$150.00

After MAY 15, 2001 Fee will be \$350.00

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 Director ☐ Delete
 NAME Silva, Sergio E.
 STREET ADDRESS 2121 Ponce De Leon Blvd, 620
 CITY - ST - ZIP Coral Gables, FL 33134

TITLE Director ☐ Change ☐ Addition
 NAME Gomez, Juan N.
 STREET ADDRESS 2121 Ponce De Leon Blvd. 620
 CITY - ST - ZIP Coral Gables, FL 33134 ☐ Change ☐ Addition

TITLE Director ☐ Delete
 NAME Motta, Omar O.
 STREET ADDRESS 2121 Ponce De Leon Blvd., 620
 CITY - ST - ZIP Coral Gables, FL 33134

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
 NAME
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 CITY - ST - ZIP

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: *Sergio Silva*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/01

Date

(305) 529-1967

Daytime Phone #