

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2000 8:00 am
Secretary of State
04-17-2000 90056 015 ***150.00

DOCUMENT # **P91000030510**
Entity Name
BRICKELTON U.S.A. Corp

Principal Place of Business
512 NW 61 ST. S-101
MIAMI FL 33166

3. Mailing Address
512 NW 61 ST. S-101
MIAMI FL 33166



DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0768457

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

6. Name and Address of Current Registered Agent
GRUENINGER & PUJOL, P.A.
3191 CORAL WAY, SUITE 1005
MIAMI FL 33145

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 of Registered Agent
SS
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when transferring) DATE

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

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<input type="checkbox"/> Delete	Carlos E Rodriguez 8512 NW 61 ST. #101 MIAMI FL 33166 VPD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	EVP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: **SS**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICIAL FOR DIRECTOR

4/10/00 305-444-7442

CR2E034 (9/99)