

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90164 017 ***150.00

049097 AV

DOCUMENT # P97000036306

1. Entity Name

CHEXX MARKETING U.S.A., INC.



Principal Place of Business

1710 DREW STREET

SUITE 1

CLEARWATER FL 33765

US

Mailing Address

P.O. BOX 4358

CLEARWATER FL 33758

US

2. Principal Place of Business

5665 CENTRAL AVE.

Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 49111

Suite, Apt. #, etc.

City & State

ST. PETERSBURG, FL

City & State

CLEARWATER ST. PETERSBURG

Zip

33710

Country

U.S.A.

Zip

33743-9111

Country

U.S.A.

4. FEI Number

59-3450401

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

WELDON, ROBERT M

101 MAIN ST SUITE B

SAFETY HARBOR FL 34695

7. Name and Address of New Registered Agent

Name

HENRI M. BERGE

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

1200 S. MISSOURI AVE. # 329

City

CLEARWATER, FL 33756 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

04-21-03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **BERGE, HENRI MARIE A**
STREET ADDRESS **1710 DREW STREET, STE 1**
CITY-ST-ZIP **CLEARWATER FL 33765**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **HENRI M. BERGE**
STREET ADDRESS **1200 S. MISSOURI AVE.**
CITY-ST-ZIP **CLEARWATER, FL 33756**

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

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-21-03

Date

Daytime Phone #

CR2E034 (10/02)