

2001 UNIFORM BUSINESS REPORT (UBR)

3/8/0

FILED
Apr 12, 2001 8:00 am
Secretary of State

03-08-2001 90057 044 ***150.00

DOCUMENT # P97000043380

1. Entity Name

CANUSMEX BROKERS INC.

Principal Place of Business

Mailing Address

1450 MADRUGA AVE.
 STE 200
 CORAL GABLES FL 33146
 US

1450 MADRUGA AVE.
 STE 200
 CORAL GABLES FL 33146
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0755438

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

~~DEL-CASTILLO, HECTOR~~
 1450 MADRUGA AVE.
 STE 200
 CORAL GABLES FL 33146

Name **RODRIGO NAVARRETE**

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

1450 MADRUGA AV # 200

City **COCONUT GROVE**

FL

Zip Code **33146**

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

FEB 21 / 2001

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, 2001 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

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | Delete |
|-------|-----------------------------|-----------------------------------|------------------------------|-------------------------------------|
| | D | | | <input checked="" type="checkbox"/> |
| | DEL CASTILLO, MANUEL | 1450 MADRUGA AVE., STE 200 | CORAL GABLES FL 33146 | |
| | D | | | <input checked="" type="checkbox"/> |
| | DEL CASTILLO, HECTOR | 1450 MADRUGA AVE., STE 200 | CORAL GABLES FL 33146 | |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | Change | Addition |
|-----------------------|--------------------------|---|--------------------------|--------------------------|-------------------------------------|
| PRESIDENT | RODRIGO NAVARRETE | 26 55 COLLINS AV. 509 | MIAMI BEACH 33140 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| VICE PRESIDENT | VIVIAN MESONES | 10254 W. BAY HARBOR DR #4E | BAY HARBOR | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| MANAGER | RAUL BULLHOSSEN | 20191 EAST COUNTRY CLUB DRIVE APT 1604 | AGUANTON FL 33180 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 21 / 2001

Date

305-661-4758

Daytime Phone #

CR2E034 (10/00)