

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000075996

1. Entity Name

OLIDELTON USA, INC.

FILED
Mar 25, 2000 8:00 am
Secretary of State

03-25-2000 90007 010 ***150.00

Principal Place of Business

Mailing Address

14861 SW 104TH ST #2823
MIAMI FL 33196

14861 SW 104TH ST #2823
MIAMI FL 33196-2462

2. Principal Place of Business

3. Mailing Address

17731 S.W 140 CT

17731 S.W 140 CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI / FL

MIAMI / FL

Zip

Country

Zip

Country

33177

USA

33177

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRETTO, JANETT E
14861 SW 104TH ST #2823
MIAMI FL 33196

Name

PRETTO, JANETT E.

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

17731 S.W 140TH CT.

City

MIAMI

FL

Zip Code

33177

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

Janett Pretto

JANETT PRETTO

PRESIDENT

03-20-00

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 PSD ☐ Delete
NAME PRETTO, JANETT E
STREET ADDRESS 14861 SW 104TH ST #2823
CITY-ST-ZIP MIAMI FL 33196

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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:

Janett Pretto PRETTO, JANETT E
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-20-00

Date

(305) 253-3045

Daytime Phone #

CP2E034 (9/99)