## **2001 UNIFORM BUSINESS REPORT (UBR)** May 05, 2001 8:00 am Secretary of State DOCUMENT # **P97000097761** THE UNITED STATES WORLD TRADE ORGANIZATION, INC. 05-05-2001 91103 001 \*\*\*150.00 Principal Place of Business Mailing Address 3453 NW 44TH STREET 3453 NW 44TH STREET #107 #107 ひせいひひひむ FORT LAUDERDALE FL 33309 FORT LAUDERDALE FL 33309 US US 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 65-0796484 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PELAEZ, SERGIO Street Address (P.O. Box Number is Not Acceptable) 1021 MOCKINGBIRD LANE, SUITE 405 PLANTATION FL 33324 City Zip Code FI 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PVST** TITLE ☐ Change ☐ Delete TITL F ☐ Addition ROCHA, JORGE E NAME NAME 3453 NW 44TH STREET 107 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33309 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete 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.

NAME

STREET ADDRESS CITY-ST-ZIP

NAME

STREET ADDRESS