

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000008240

1. Entity Name

PRIMO ENTERPRISE USA, INC.

FILED
Feb 09, 2000 8:00 am
Secretary of State

02-09-2000 90221 046 ***150.00

Principal Place of Business

4701 N.W. 34TH STREET
APT. TT502
LAUDERDALE LAKES FL 33319

Mailing Address

4701 N.W. 34TH STREET
APT. TT502
LAUDERDALE LAKES FL 33319-5419

2. Principal Place of Business

4701 N.W. 34th Street
Suite, Apt. #, etc.
APT. TT502

3. Mailing Address

4701 N.W. 34th Street
Suite, Apt. #, etc.
APT. TT502

City & State

LAUDERDALE LAKES

City & State

LAUDERDALE LAKES

Zip

FL-33319

Country

BROWARD

Zip

FL-33319

Country

BROWARD



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0808213

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FIORE, PRIMIANO
4701 N.W. 34TH STREET
APT. TT502
LAUDERDALE LAKES FL 33319

7. Name and Address of New Registered Agent

Name FIORE PRIMIANO
Street Address (P.O. Box Number is Not Acceptable)
4701 N.W. 34th Street Apt. TT502
LAUDERDALE LAKES
City Florida FL Zip Code 33319

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

PRIMIANO FIORE Pres. 1/28/2000
(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

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FIORE, PRIMIANO 4701 N.W. 34TH STREET, APT. TT502 LAUDERDALE LAKES FL 33319 | <input type="checkbox"/> Delete |
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P FIORE PRIMIANO 4701 N.W. 34th Street Apt. TT502 LAUDERDALE LAKES FL-33319 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> 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 the 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:

Primiano Fiore
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 28 - 2000
Date

954-485-5306
Daytime Phone #

CR2E034 (9/99)