

02 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 DEC -3 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000064558

1. Entity Name

POWER CODE, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7244 NW 31 Street

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, Florida

City & State

4. FEI Number

65-0851925

Applied For

Not Applicable

Zip
33122

Country
US

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name YURE CONTRERAS

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

7244 NW 31 Street

City Miami

FL

Zip Code
33122

**DO NOT WRITE
IN THIS SPACE**

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

11/21/2002

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

(NOTE: Registered Agent signature required when re-issuing)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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-STATE-ZIP
CONTRERAS, YURE - President
7244 NW 31 Street
Miami, Florida, 33122

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

300009333063
12/04/02--01009--003 **150.00

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
CONTRERAS, MONICA - VP
7244 NW 31 Street
Miami, Florida, 33122

TITLE
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CITY-STATE-ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

11/21/2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

12/6

November 21, 2002

Division of Corporations
PO BOX 6478
Tallahassee, FL, 32314

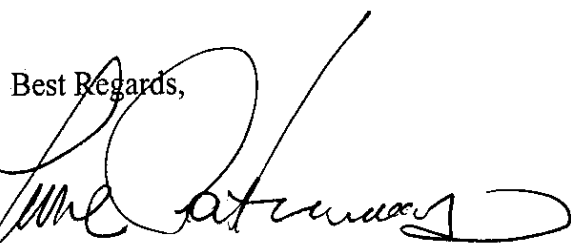
Dear Sirs,

The following note is to request your consideration regarding to the Uniform Business Report of Power Code, Inc which was not presented on time, because the UBR Report was not received by the corporation.

Please find enclosed a check for \$150 to comply with the filing fee.

Thanks in advance for the cooperation regarding this matter.

Best Regards,



Yure Contreras
Power Code, Inc
President