

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 30, 2002 8:00 am
Secretary of State

05-01-2002 91612 026 ***150.00

DOCUMENT # P980Q0070385

1. Entity Name

GATEWAY INTERNATIONAL (USA), INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6807 Tamra Lane

3. Mailing Address
6565 Beach Boulevard

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Suite 14

DO NOT WRITE IN THIS SPACE

City & State
Jacksonville, FL

City & State
Jacksonville, FL

4. FEI Number
59-3539691

Applied For
☐ Not Applicable

Zip
32216

Country
Duval

Zip
32216

Country
Duval

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name
Charles McCormick

Street Address (P.O. Box Number is Not Acceptable)
6807 Tamra Lane

City
Jacksonville,

City Jacksonville **FL** **Zip Code** 32216

**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

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) ☐

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 - ST - ZIP

XXX
XXXXXXXXXXXXXXXXXXXX

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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CITY - ST - ZIP

DP
McCormick, Charles
6807 Tamra Lane
Jacksonville, FL 32216

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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:

Charles W. McCormick
Signature and Typed or Printed Name of Signing Officer or Director

4/17/02 904/725-9280
Date Daytime Phone #

Charles W. McCormick
CHARLES W. MCCORMICK

CR20348 (12/01)