

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000073768

FILED  
Sep 09, 2002  
Secretary of State

Entity Name: ABAKUA INC.

## Current Principal Place of Business:

10801 SW 109TH COURT  
SUITE D-109  
MIAMI, FL 33176

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 403322  
MIAMI, FL 33140

## New Mailing Address:

FEI Number: 65-0860128

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GODREAU, JOSE  
10801 SW 109TH COURT  
SUITE D-109  
MIAMI, FL 33176 US

## Name and Address of New Registered Agent:

SILVA, SAMUEL  
10801 SW 109TH COURT  
SUITE D-109  
MIAMI, FL 33176 US

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: SAMUEL SILVA

09/09/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: SILVA, SAMUEL  
Address: PO BOX 403322  
City-St-Zip: MIAMI, FL 33140

Title: VP ( ) Delete  
Name: SILVA, SAMUEL SR  
Address: PO BOX 403322  
City-St-Zip: MIAMI, FL 33140

Title: S ( ) Delete  
Name: SANTOS, A D  
Address: PO BOX 403322  
City-St-Zip: MIAMI, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL SILVA

PS

09/09/2002

Electronic Signature of Signing Officer or Director

Date