

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90397 014 ***150.00

DOCUMENT # P99000014697

1. Entity Name
EXXEL TECHNOLOGIES INC.

Principal Place of Business

7620 NW 125TH STREET
3
MIAMI FL 33122

Mailing Address

7620 NW 125TH STREET
3
MIAMI FL 33122

2. Principal Place of Business

7620 NW 25th STREET
Suite, Apt. #, etc.
BAY #3

City & State
MIAMI FL

Zip
33122

Country

3. Mailing Address

7620 NW 25th STREET
Suite, Apt. #, etc.
BAY #3

City & State
MIAMI FL

Zip
33122

Country

4. FEI Number

65-0918327

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VEGA, JOSE M
25 SE 2 AVE
410
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name
ADOLFO IGLESIAS

Street Address (P.O. Box Number is Not Acceptable)
13501 SW 128th STREET

SUITE #208

City
Miami

FL

Zip Code
33186

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

ADOLFO IGLESIAS

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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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
D ☐ Delete
NAME
ANDRES CAMPOS-CERVERA BOLLER
STREET ADDRESS
28 DEANEWOOD CRESCENT ETOBICOKE
CITY-ST-ZIP
ONTARIO CANADA M9B 3B1

TITLE
PS ☒ Delete
NAME
ESCAURIZA, GILBERTO V
STREET ADDRESS
10295 COLLINS AVENUE #1110
CITY-ST-ZIP
MIAMI BEACH FL 33154

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P ☐ Change ☒ Addition
NAME
JUAN CARLOS DE LA ROSA
STREET ADDRESS
7620 NW 25 Street #3
CITY-ST-ZIP
Miami FL 33122

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-06-02

Date

Daytime Phone #

CP2E034 (9/01)