

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000021840

1. Entity Name

MERCOSUR IMPORT EXPORT CORPORATION

**FILED**  
**Mar 20, 2000 8:00 am**  
**Secretary of State**

03-20-2000 90015 021 \*\*\*150.00

Principal Place of Business

8550 W. FLAGLER STREET  
#111  
MIAMI FL 33144

Mailing Address

8550 W. FLAGLER STREET  
#111  
MIAMI FL 33144-2037

2. Principal Place of Business

7380 N.W. 56 ST  
Suite, Apt. #, etc.

3. Mailing Address

7380 NW 56 ST  
Suite, Apt. #, etc.

City & State

MIAMI

City & State

MIAMI

4. FEI Number

65-0909366

Applied For

Not Applicable

Zip

FL

Country

Zip

33166

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

VIDAL, BART C  
8550 W. FLAGLER STREET  
#111  
MIAMI FL 33144

7. Name and Address of New Registered Agent

Name CARLOS COCA

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

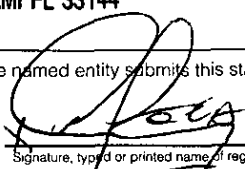
7380 N.W. 56 ST

City MIAMI

FL

Zip Code 33166

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  (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 PSD  
NAME COCA, CARLOS G  
STREET ADDRESS 8550 W. FLAGLER STREET  
CITY-ST-ZIP MIAMI FL 33144 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS 7380 N.W. 56 ST  
CITY-ST-ZIP MIAMI, FL 33166 ☒ Change ☐ Addition

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

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

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

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARLOS G. COCA

Date

2/17/00

Daytime Phone #

305-887-8697

CR2E034 (9/99)