

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 14, 2001 8:00 am**  
**Secretary of State**

05-14-2001 90213 047 \*\*\*150.00

**DOCUMENT # P99000039769**

1. Entity Name

APAX USA, INC. Espace Mode, Inc. ✓

N/c 4/12/01 (TM)

Principal Place of Business

2232 NW 82ND AVE.  
 MIAMI FL 33122

Mailing Address

2232 NW 82ND AVE.  
 MIAMI FL 33122

2. Principal Place of Business

777 NW 72nd Ave

3. Mailing Address

777 NW 72nd Ave

Suite, Apt. #, etc.

311

Suite, Apt. #, etc.

311

City & State

Miami, FL

City & State

Miami, FL

Zip

33126

Country

USA

Zip

33126

Country

USA

4. FEI Number

65-0922966

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

BOURGOIGNIE, P. TRISTAN ESQ.  
 701 BRICKELL AVENUE, SUITE 1900  
 MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 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 P  
 NAME BENSOUSSAN, PATRICK  
 STREET ADDRESS 41 RYE DY DICTEYR TERVER  
 CITY-ST-ZIP ECULLY FR 69130 ☐ Delete

TITLE V  
 NAME ELBAZ, JEAN-MICHEL  
 STREET ADDRESS 2127 BRICHELL AVENUE  
 CITY-ST-ZIP MIAMI FL 33129 ☐ 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 P ☒ Change ☐ Addition  
 NAME Bensoussan, Patrick  
 STREET ADDRESS 10101 Collins Ave Appt 14B  
 CITY-ST-ZIP Bal Harbour, FL 33154

TITLE VP ☒ Change ☐ Addition  
 NAME ELBAZ, Jean-Michel  
 STREET ADDRESS 10275 Collins Ave Appt 809  
 CITY-ST-ZIP Bal Harbour, FL 33154

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)(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: Jean-Michel ELBAZ  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/01 305 260 8141  
 Date Daytime Phone #

CR2E034 (10/00)