

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000043172

1. Entity Name

DANIEL USA CORPORATION

FILED

Feb 19, 2001 8:00 am  
Secretary of State

02-19-2001 90268 010 \*\*\*150.00

Principal Place of Business

3311 SW 92 AVE  
MIAMI FL 33165

Mailing Address

3311 SW 92 AVE  
MIAMI FL 33165

2. Principal Place of Business

3311 SW 92 Ave

Suite, Apt. #, etc.

3. Mailing Address

3311 SW 92 Ave

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33165

Country

USA

Zip

33165

Country

USA

4. FEI Number

65-0919055

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, DANIEL  
3311 SW 92 AVE  
MIAMI FL 33165

7. Name and Address of New Registered Agent

Name

Daniel Rodriguez

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

3311 SW 92 Ave

City Miami

FL

Zip Code 33165

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 Daniel Rodriguez

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/2/01  
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 PTSD  
NAME RODRIGUEZ, DANIEL  
STREET ADDRESS 3311 SW 92 AVE  
CITY-ST-ZIP MIAMI FL 33165 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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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 PTSD  
NAME Rodriguez, Daniel  
STREET ADDRESS 3311 SW 92 Ave.  
CITY-ST-ZIP Miami, FL 33165 ☒ 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)(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: Daniel Rodriguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/01

Date

(305) 345-8145

Daytime Phone #

CR2E034 (10/00)