

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90034 047 ***150.00

DOCUMENT # P99000043172

1. Entity Name
DANIEL USA CORPORATION

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

3. Mailing Address

3311 SW 92 Ave

Suite, Apt. #, etc.

Miami, FL.

Suite, Apt. #, etc.

City & State

Miami, FL.

4. FEI Number

65-0919055-

Applied For

Not Applicable

Zip

33165

Country

USA

Zip

33165

Country

USA

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.

[Handwritten Signature]

Signature of Registered Agent (signature required when reinstating)

1/20/02

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTSD** ☐ Change ☐ Addition
 NAME **Daniel Rodriguez**
 STREET ADDRESS **3311 SW 92 Ave**
 CITY-ST-ZIP **Miami, FL. 33165**

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

TITLE ☐ Change ☐ Addition
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 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 OF REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/02

Date

(205) 345-8145

Daytime Phone #

CR2E034 (9/01)