

2000 UNIFORM BUSINESS REPORT (UBR)

3/

FILED
May 12, 2000 8:00 am
Secretary of State

03-14-2000 90021 040 ***158.75

DOCUMENT # P99000045692

1. Entity Name

RECCHI AMERICA, INC.

Principal Place of Business

**9200 S. DADELAND BLVD., STE. 225
 MIAMI FL 33156**

Mailing Address

**9200 S. DADELAND BLVD., STE. 225
 MIAMI FL 33156-2707**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0997257

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CUMMINGS, F. ALAN
 1004 DESOTO PARK DR.
 TALLAHASSEE FL 32301**

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, 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	PD	<input checked="" type="checkbox"/> Delete
NAME	RECCHI, GIUSEPPE	
STREET ADDRESS	9200 S. DADELAND BLVD., STE. 225	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	VD	<input type="checkbox"/> Delete
NAME	BELLERO, CHIAFFREDO	
STREET ADDRESS	9200 S. DADELAND BLVD., STE. 225	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ORTIZ, MARIA	
STREET ADDRESS	9200 S. DADELAND BLVD., STE. 225	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ESPINO, ENRIQUE I	
STREET ADDRESS	9200 S. DADELAND BLVD., STE. 225	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D/P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARPER, ALLEN, C	
STREET ADDRESS	9200 S. DADELAND BLVD. #225	
CITY-ST-ZIP	Miami, FL 33156	
TITLE	D/SVP/COO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BELLERO, CHIAFFREDO	
STREET ADDRESS	9200 S DADELAND BLVD. #225	
CITY-ST-ZIP	Miami, FL 33156	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ORTIZ, MARIA	
STREET ADDRESS	9200 S. DADELAND BLVD. #225	
CITY-ST-ZIP	Miami, FL 33156	
TITLE	D/EV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ESPINO, ENRIQUE I.	
STREET ADDRESS	9200 S. DADELAND BLVD. #225	
CITY-ST-ZIP	Miami, FL 33156	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	IGLESIAS, JUAN J.	
STREET ADDRESS	9200 S. DADELAND BLVD. #225	
CITY-ST-ZIP	Miami, FL 33156	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MASCAGNA, DAVID	
STREET ADDRESS	9200 S. DADELAND BLVD. #225	
CITY-ST-ZIP	Miami, FL 33156	

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 an officer like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Enrique I. Espino

1/31/00

(305)670-7585

Date

Daytime Phone #

CR2E034 (9/99)