2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2000 8:00 am
Secretary of State
05-12-2000 90056 043 ***150.00

DOCUMENT # P99000053875

1. Entity Name
NORTEAM USA CORPORATION
2742 BISCAYNE BLVD
MIAMI, FL 33137

Principal Place of Business
2742 BISCAYNE BLVD
MIAMI, FL 33137

Mailing Address
2742 BISCAYNE BLVD
MIAMI, FL 2237

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | County

3. Mailing Address
2742 BISCAYNE BLVD
Suite, Apt. #, etc.
MIAMI, FL 33137
City & State
Zip | County

[redacted]

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0954253
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

PABLO G. BARREIRO
2742 BISCAYNE BLVD
MIAMI, FL 33137

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
2742 BISCAYNE BLVD

City MIAMI FL 33137 **FL** Zip Code

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] 4/26/00
Signature of new registered agent (and name of new registered agent and title if applicable) (Must Be Typed) (Agent signature required when reinstating) DATE

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

OFFICERS AND DIRECTORS

DP
PABLO G. BARREIRO
330 SUNNY ISLE BLVD
SUNNY ISLE, FL 33160
☐ Delete

D
BEATRIZ E. ALLOCO DE BARREIRO
330 SUNNY ISLE BLVD
SUNNY ISLE, FL 33160
☐ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☒ Change ☐ Addition
2742 BISCAYNE BLVD
MIAMI, FL 33137

☒ Change ☐ Addition
2742 BISCAYNE BLVD
MIAMI, FL 33137

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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] P. BARREIRO 4/26/00 305-573-6640
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL FILING REPORT Date Daytime Phone #