

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 09, 2002 8:00 am**  
**Secretary of State**

07-09-2002 90019 043 \*\*\*150.00

**DOCUMENT # P99000057792**

1. Entity Name  
**ANTRO, INC.**

Principal Place of Business

**5439 NW 36TH STREET  
 MIAMI FL 33166**

Mailing Address

**5439 NW 36TH STREET  
 MIAMI FL 33166**

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 **65-0937980**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KRUSZEWSKI, ANTHONY E  
 5439 NW 36TH STREET  
 MIAMI FL 33166**

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00  
 After September 13, 2002 Fee will be \$750.00  
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME     | STREET ADDRESS               | CITY-ST-ZIP                                       | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|----------|------------------------------|---|-------|------|----------------|-------------|
|       | <b>D</b> | <b>KRUSZEWSKI, ANTHONY E</b> | <b>5439 SW 36TH ST<br/>MIAMI SPRINGS FL 33166</b> |       |      |                |             |
|       |          |                              |   |       |      |                |             |
|       | <b>D</b> | <b>KRUSZEWSKI, ROSE</b>      | <b>5439 NW 36TH ST<br/>MIAMI SPRINGS FL 33166</b> |       |      |                |             |
|       |          |                              |   |       |      |                |             |
|       | <b>D</b> | <b>KRUSZEWSKI, JOHN</b>      | <b>5439 NW 36TH ST<br/>MIAMI SPRINGS FL 33166</b> |       |      |                |             |
|       |          |                              |   |       |      |                |             |
|       |          |                              |   |       |      |                |             |
|       |          |                              |   |       |      |                |             |
|       |          |                              |   |       |      |                |             |

CR2E034 (4/02)

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/5/02 305-885-4991**

Date

Daytime Phone #

*Att. Delivered*  
*Doc #*  
*99000057792*  
*119708*

5439 NW 36 ST. MIAMI SPRINGS, FL 33166 USA  
PH 305.885.4991 FAX 305.887.2405  
sales@usairmotive.com



# Fax

To: *To Whom It May Concern* From: Adrienne Grella  
Fax: Pages: 1  
Phone: Date: *7/5/02*  
Re: *Uniform Business Rep* CC:  
☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

• Comments:

*Please waive the penalty as we*  
*never received the first notice.*

*Enclosed is our check for \$150.00*

*Thank you for your assistance.*