

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90134 037 ***158.75

DOCUMENT # P99000060543

1. Entity Name
POSITIVE ENERGY GROUP COMPANY

Principal Place of Business

**153 10 SW 52 LANE
 MIAMI FL 33185**

Mailing Address

**153 10 SW 52 LANE
 MIAMI FL 33185**

2. Principal Place of Business

**10765 NW 50 st
 Suite, Apt. #, etc. #308**

3. Mailing Address

**10765 NW 50 st
 Suite, Apt. #, etc. #308**

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0932384

Applied For

Not Applicable

Zip

33178

Country

USA

Zip

33178

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ABAD, CARLOS
 153 10 SW 52 LANE
 MIAMI FL 33185**

7. Name and Address of New Registered Agent

Name

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

10765 NW 50 st #308

City **Miami**

FL

Zip Code **33178**

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 of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/02

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 **PD** ☐ Delete
 NAME **ABAD, CARLOS**
 STREET ADDRESS **153 10 SW 52 LANE**
 CITY-ST-ZIP **MIAMI FL 33185**

TITLE **SD** ☐ Delete
 NAME **CUARTAS, ANA MILENA**
 STREET ADDRESS **153 10 SW 52 LANE**
 CITY-ST-ZIP **MIAMI FL 33185**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
 NAME **Abad, Carlos**
 STREET ADDRESS **10765 NW 50 st #308**
 CITY-ST-ZIP **Miami, FL 33178**

TITLE **SD** ☒ Change ☐ Addition
 NAME **Cuarta, Ana Milena**
 STREET ADDRESS **10765 NW 50 st #308**
 CITY-ST-ZIP **Miami, FL 33178**

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

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

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

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 REQUIRED

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/02 178678457151

CR2E034 (9/01)