

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90437 036 ***150.00

DOCUMENT # **P990000062345**

1. Entity Name

CORPERUSA-INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

445 NE 195 ST.

3. Mailing Address

Same

DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

422

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Same

4. FEI Number

65-0933438

Applied For

Not Applicable

Zip

33179

Country

Miami-Dade

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Jorge Bautista

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

1250 NE 211 Street

Miami

Florida

City

FL

Zip Code

33179

**DO NOT WRITE
IN THIS SPACE**

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reissuing)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 **P.**
NAME **Jorge Bautista (President)**
STREET ADDRESS **1250 NE 211 ST.**
CITY-ST-ZIP **North Miami, FL. 33179**

TITLE **S.**
NAME **Secretary - Jenny Bautista**
STREET ADDRESS **445 NE 195 ST. #422**
CITY-ST-ZIP **Miami, FL. 33179**

TITLE
NAME **Treasure - Percy J. Bautista**
STREET ADDRESS **445 NE 195 ST. #422**
CITY-ST-ZIP **Miami, FL. 33179**

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **JORGE BAUTISTA PRESIDENTE**

004-24-02 (305) 2819777

Date

Daytime Phone #

CR2E034B (12/01)