

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000073451

1. Entity Name

LAND DEVELOPER S.A., USA., INC.

Principal Place of Business

NEW WORLD TOWER BLDG.
100 N. BISCAYNE BLVD. SUITE 1407
MIAMI FL 33132

Mailing Address

NEW WORLD TOWER BLDG.
100 N. BISCAYNE BLVD. SUITE 1407
MIAMI FL 33132

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 65-0945188

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, HOSEY ESQ.
2701 SOUTH BAYSHORE DRIVE
SUITE 602
COCONUT GROVE FL 33133

7. Name and Address of New Registered Agent

Name Argentinian Construction Group, L.L.C.

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

100 N. Biscayne Blvd, Suite 1407

City MIAMI

FL

Zip Code 33132

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

3/29/01

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, 2001 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 MOLINARI, CARLOS JUAN
STREET ADDRESS SARIMENTO 539 TERCER-PISO
CITY-ST-ZIP CAPITAL FEDERAL, ARGENTINA

TITLE VPD ☐ Delete
NAME GUILLERMO VILLAR, HECTOR
STREET ADDRESS SARIMENTO 539 TERCER-PISO
CITY-ST-ZIP CAPITAL FEDERAL, ARGENTINA

TITLE D ☐ Delete
NAME MOLINARI, DIEGO
STREET ADDRESS SARIMENTO 539 TERCER-PISO
CITY-ST-ZIP CAPITAL FEDERAL, ARGENTINA

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

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

TITLE ☐ Change ☐ Addition
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/29/01

FILED
Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90040 038 ***150.00

00007100



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)