## 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000074234 1. Entity Name EMERALD U.S.A., INC. Principal Place of Business Mailing Address Mailing Address Mailing Address

100 N. BISCAYNE SUITE 2608 MIAMI FL 33132	E BOULEVARD	100 N. BISCAYNE BOULEVARD SUITE 2608 MIAMI FL 33132				~ ~ I W I				
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State			4. F	El Number <b>65-0985719</b>	- 100	<b>—</b>	olied For Applicable	
Zip	Country	Zip	ip Gountr			Certificate of Status Desired		8.75 Addi ee Required	tional	
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
				Name						
BERNSTEIN, JEFFREY A				Street Address (P.O. Box Number is Not Acceptable)						
100 N. BISCAYNE BOULEVARD										
SUITE 2608 MIAMI FL 33132										
MIAM	I FL 33132		City			FL	Zip Code	<del>,</del>		
								1		
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 agont a	nd title if applicable. (NOT	E: Registere	d Agent signatu	re required when re	einstating)	DATE			
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! F						10. Election Campaign Fina		\$5.0	<b>0</b> Mav Be	
(See criteri	equirement and elects to do so.  a on back)	After MAY 1, 2001 Fee will be \$550 Make Check Payable to Department of				Trust Fund Contribution	. 🗆		to Fees	
11,	OFFICERS AND I		12.			DOITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11	
TITLE	D	Delete	TITLE	;	D/:	DEMONS/GHANGES TO OFFE		Change	Addition	
NAME	KITTIAMPON, VALEE	L. Delete	NAM			PON, Valee		A_1 ondings	7.00.1.011	
STREET ADDRESS 100 N. BISCAYNE BLVD., SUITE		<b>2608</b> st		ET ADDRESS		Biscayne Blvd. #	2608		1	
CITY-ST-ZIP	MIAMI FL 33132		CITY	-ST-ZIP	Miami,	FL 33132	2000			
TITLE	D	☐ Delete	TITL	<u> </u>	P/D			Change	☐ Addition	
NAME	RADEESRI, NONGYAO		NAM	E	RADEESR	I, Nongyao				
STREET ADDRESS	100 N. BISCAYNE BLVD., SUITE	2608	1	ET ADDRESS		Biscayne Blvd.,	#2608		1	
CITY-ST-ZIP	MIAMI FL 33132		CITY	-ST-ZIP		FL 33132				
TITLE	D	☐ Delete	TITL		V/T/D	MON II		<b>XX</b> Change	Addition	
NAME STREET ADDRESS	KITTIAMPON, KRIT	0000	NAM	EET ADDRESS		IPON, Krit Biscayne Blvd.,	#2600			
CITY-ST-ZIP	100 N. BISCAYNE BLVD., SUITE MIAMI FL 33132	2000	- E	-ST-ZIP		FL 33132	11 2000			
TITLE	D	Delete	TITL		S/D	<u> 11                                  </u>		X Change	Addition	
NAME	PETTINI, GIAMPAOLO	□ Delete	NAM			, Giampaolo		42 Officings		
STREET ADDRESS	100 N. BISCAYNE BLVD., SUITE	2608	STRI	EET ADDRESS	100 N.	Biscayne Blvd.,	#2608			
CITY-ST-ZIP	MIAMI FL 33132		CITY	'-ST-ZIP	Miami,	FL 33132			'	
TITLE		☐ Delete	ŤITL	E				☐ Change	Addition	
NAME			NAN							
STREET ADDRESS				EET ADDRESS	(					
CITY-ST-ZIP				/-ST-ZIP			<del></del>			
TITLE		☐ Delete	TITL					☐ Change	Addition	
NAME STREET ADDRESS			NAN STR	AE EET ADDRESS						
CITY-ST-ZIP			1	Y-ST-ZIP	1					

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:

Giampaolo Pettini, Secretary

1/30/01

305-371-4555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)