

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90192 011 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000098211

1. Entity Name

USA POLYMERS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
901 Chestnut Street

Suite, Apt. #, etc.

Suite A

City & State
Clearwater, Florida

Zip
33756

Country

US

3. Mailing Address
901 Chestnut Street

Suite, Apt. #, etc.

Suite A

City & State
Clearwater, Florida

Zip
33756

Country

US

4. FEI Number
22-2131842

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name
Couture, Gerald

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

Suite A

City
Clearwater,

FL

Zip Code
33756

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.

Gerald Couture

(NOTE: Registered Agent signature required when reinstating)

4/26/02
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	NAME	STREET ADDRESS	CITY - ST - ZIP
P	Brennin, Kevin	901 Chestnut Street, Suite A	Clearwater, Florida 33756

**DO NOT WRITE
IN THIS SPACE**

CR2E034B (12/01)

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin Brennin

4/15/02

Date

Daytime Phone #