

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

10f2

DOCUMENT # S07986
1. Entity Name

M.C.A. EXPORTERS, INC.

FILED

02 NOV 21 AM 11:44

SECRETARY OF STATE
TALLAHASSEE, FL 32399

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
8500 NW 4TH TERR
Suite, Apt. #, etc. 3

3. Mailing Address
2121 PONCE DE LEON BLVD
Suite, Apt. #, etc. 240

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City & State
MIAMI, FL

City & State
CORAL GABLES, FL

4. FEI Number
65-0250885

Applied For
Not Applicable

Zip 33126 Country

Zip 33134 Country

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

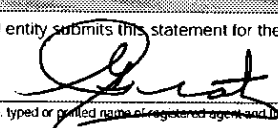
Name
PRATS, GABRIEL

Street Address (P.O. Box Number is Not Acceptable)
2121 PONCE DE LEON BLVD., #240

City
CORAL GABLES FL

Zip Code
33134

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  7-30-02
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating) 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
PD	D'ARNAULT, STANLEY J.	TAPANAHONYSTRAAT NO. 8	REPUBLIC OF SURINAME
STD	D'ARNAULT, CARMEN D.	TAPANAHONYSTRAAT NO. 8	REPUBLIC OF SURINAME

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

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IN THIS SPACE

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

Date 15-11-2002 Daytime Phone #

CR2E034B (12/01)

M.C.A. EXPORTERS, INC.
2121 Ponce de Leon Blvd #240
Coral Gables, FL 33134

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Our Accountants have checked the records at the Division of Corporations and found that the 2002 Uniform Business Report (U.B.R.) for our company has not been filed.

If you have any questions, please call our accountants Prats Fernandez & Co. at Tel: (305) 444-8333.

Edmund

M.C.A. EXPORTERS, INC.