

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90322 036 ***150.00

DOCUMENT # S59626

1. Entity Name
COSTA-USA, INC.

Principal Place of Business INSURGENTES SUR 1999 COLONIA GUADALUPE INN MEXICO, D.F. US	Mailing Address INSURGENTES SUR 1999 COLONIA GUADALUPE INN MEXICO, D.F. US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0274303**

Applied For
 Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VILLA, OSCAR J III
 2100 SALZEDO ST
 SUITE 300
 CORAL GABLES FL 33134**

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State FL Zip Code

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 _____ (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)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	BOLANOS CACHO, AGUSTIN GARCIA	
STREET ADDRESS	INSURGENTES SUR 1999	
CITY-ST-ZIP	MEXICO, D.F.	
TITLE	S	<input type="checkbox"/> Delete
NAME	REVILLA, CARLA	
STREET ADDRESS	INSURGENTES SUR 1999	
CITY-ST-ZIP	MEXICO, D.F.	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	SUAREZ, DAVID	
STREET ADDRESS	INSURGENTES SUR 1999	
CITY-ST-ZIP	MEXICO, D.F.	
TITLE	T	<input type="checkbox"/> Delete
NAME	MARQUEZ, JAIME	
STREET ADDRESS	INSURGENTES SUR 1999	
CITY-ST-ZIP	MEXICO, D.F.	
TITLE	AT	<input type="checkbox"/> Delete
NAME	WARREN, THOMAS	
STREET ADDRESS	INSURGENTES SUR 1999	
CITY-ST-ZIP	MEXICO, D.F.	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: _____ DATE: _____ DAYTIME PHONE #: _____

CR2E034 (10/00)

Doc # 559020
B0018512

1037

63-60/660

DATE FEBRUARY 26, 2001

\$ 150.00

Security Features
Date of issue

DOLLARS

GRUPO COSTAMEX S.A. DE C.V.

PAY TO THE ORDER OF *** FLORIDA DEPARTMENT OF STATE ***

ONE HUNDRED FIFTY DOLLARS AND 00/100 USCY

Janeth Moss

SUNTRUST

SunTrust Bank, Miami, N.A.
Miami, FL (305) 591-6000

⑆00001037⑆ ⑆066000604⑆0542001022905⑆