

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90159 018 ***150.00

DOCUMENT # S88309

1. Entity Name
NX AMERICA INC.

Principal Place of Business

~~2000 GLADES ROAD~~
~~SUITE 400~~
~~BOCA RATON FL 33431~~

Mailing Address

~~2000 GLADES ROAD~~
~~SUITE 400~~
~~BOCA RATON FL 33431~~

2. Principal Place of Business

123 NW 13th STREET

Suite, Apt. #, etc.

SUITE 311

City & State

BOCA RATON, FL

Zip

33432

Country

USA

3. Mailing Address

123 NW 13th STREET

Suite, Apt. #, etc.

SUITE 311

City & State

BOCA RATON, FL

Zip

33432

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0295281

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

HRAWG CORP.

~~2000 GLADES RD~~

~~SUITE 400~~

BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name

HRAWG CORP.

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

1801 N. MILITARY TRAIL

SUITE 200

City

BOCA RATON

FL

Zip Code
33431

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

Larry Roma

Signature, typed or printed name of registered agent and title 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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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	DP	<input type="checkbox"/> Delete
NAME	COLLAZO, GUILLERMO	
STREET ADDRESS	2000 GLADES RD 400	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	COLLAZO, ENRIQUE J	
STREET ADDRESS	2000 GLADES RD 400	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	COLLAZO, C PATRICIA C	
STREET ADDRESS	2000 GLADES RD 400	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	COLLAZO, ENRIQUE J	
STREET ADDRESS	2000 GLADES RD 400	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLAZO, GUILLERMO	
STREET ADDRESS	123 NW 13th STREET, SUITE 311	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	VPSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLAZO, ENRIQUE J.	
STREET ADDRESS	123 NW 13th STREET, SUITE 311	
CITY-ST-ZIP	BOCA RATON, FL 33432	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLAZO, PATRICIA C.	
STREET ADDRESS	123 NW 13th STREET, SUITE 311	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/2002 *561 368 4886*

Date

Daytime Phone #

CR2E034 (9/01)