2000 UNIFORM BUSINESS REPORT (UBR) FILED **DOCUMENT # V01438** May 19, 2000 8:00 am Secretary of State 1. Entity Name OFFICE USA CORP. 05-19-2000 90042 042 ***158.75 Mailing Address Principal Place of Business 6812 N.W. 77TH CT. 6812 N.W. 77TH CT. MIAMI FL 33166-2713 MIAMI FL 33166 2. Principal Place of Business 3. Mailing Address 6950 NW 77TH COURT 6950 NW 77TH COURT DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc Applied For City & State 4. FEI Number City & State 65-0307595 Not Applicable MIAMI, FL MIAMI, FL \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required <u>33166</u> 33166 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GIRALDO LEYVA JR LEYVA, GIRALDO Street Address (P.O. Box Number is Not Acceptable) 6950 NW 77TH COURT 6950 NW 77TH COURT **MIAMI FL 33166** 37 00164 Zip Code 33166 MIAMI 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. (NOTE. Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. x∐ Change Addition DVS □ Delete TITLE TITLE LEYVA, GIRALDO NAME STREET ADDRESS STREET ADDRESS 6950 NW 77TH CT 6812 N.W. 77 COURT CITY-ST-7IP CITY-ST-ZIP MIAMI, FL 33166 MIAMI FL - Change ☐ Addition ☐ Delete TITLE TITLE LEYVA, AURELIO A. NAME STREET ADDRESS STREET ADDRESS 6950 NW 77TH CT 6812 NW 77 COURT CITY-ST-ZIP CITY-ST-ZIP MIAMI FL MIAMI, FL 33166 ☐ Addition K) Delete ☐ Change AS TITLE NAME MIR. HECTOR J NAME STREET ADDRESS STREET ADDRESS 2655 LE JEUNE RD #1107 CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES FL ☐ Change **→** Addition ☐ Delete TITLE TITLE NAME NAME GIRALDO LEYVA JR STREET ADDRESS STREET ADDRESS 6950 NW 77TH CT CITY-ST-ZIP CITY-ST-ZIP <u>MIAMI, FL 33166</u> TITLE ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP be not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of curate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director secure this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with this filing defindicated on this report or supplemental report is true and for of the corporation or the receiver or trustee empowered to see changed, or on an attachment with an address, with all er like empowéred.

ME OF SIGNING OFFICER OR DIRECTOR

Date

Oaytime Phone #

SIGNATURE: