

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90301 001 ***600.00

DOCUMENT # V50324

1. Entity Name

UNO REMITTANCE, INC.

Principal Place of Business

**100 N. BISCAYNE BLVD
 SUITE 1001
 MIAMI FL 33132
 US**

Mailing Address

**100 N. BISCAYNE BLVD
 SUITE 1001
 MIAMI FL 33132
 US**

2. Principal Place of Business

**7415 N.W. 19th Street, Bay H
 Suite, Apt. #, etc.
 Bay H**

3. Mailing Address

**7415 N.W. 19th Street
 Suite, Apt. #, etc.
 Bay H**

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33126

Country

U.S.A.

Zip

33126

Country

U.S.A.

6. Name and Address of Current Registered Agent

**FREEMAN, STEPHEN A
 520 BRICKELL KEY DRIVE, SUITE 0-305
 MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name

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

City

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

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	DPT	<input type="checkbox"/> Delete
NAME	VILHENA, SERGIO MARTINS	
STREET ADDRESS	100 N BISCAYNE BLVD #1001	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE	DVS	<input type="checkbox"/> Delete
NAME	GARCIA, OSCAR	
STREET ADDRESS	100 N. BISCAYNE BLVD., #1001	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VILHENA, Sergio Martins	
STREET ADDRESS	7415 N.W. 19th Street, Bay H	
CITY-ST-ZIP	Miami, FL 33126	
TITLE	HDS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Oscar Garcia, Jr.	
STREET ADDRESS	7415 N.W. 19th Street, Bay H	
CITY-ST-ZIP	Miami, FL 33126	
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		
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:

Oscar Garcia, Jr.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/29/2002

13051470-8882

CR2E034 (9/01)