

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 06, 2001 8:00 am**  
**Secretary of State**

02-06-2001 90313 005 \*\*\*150.00

**DOCUMENT # P98000008746**

1. Entity Name  
**NERA AMERICAS INC.**

Principal Place of Business <b>701 BRICKELL AVE          STE 3200          MIAMI FL 33131</b>	Mailing Address <b>701 BRICKELL AVE          STE 3200          MIAMI FL 33131</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>1 SE 3rd Ave.          Suite, Apt. #, etc.          ste 1980          City &amp; State          Miami, FL          Zip          33131          Country          USA</b>	3. Mailing Address <b>1 SE 3rd Ave.          Suite, Apt. #, etc.          ste 1980          City &amp; State          Miami, FL          Zip          33131          Country          USA</b>
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4. FEI Number <b>65-0821844</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  
**INTRASTATE REGISTERED AGENT CORPORATION  
 701 BRICKELL AVE  
 STE 3000  
 MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b>
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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PSD	VALDAL, KJELL S	701 BRICKELL AVE, STE 3280	MIAMI FL 33131	<input checked="" type="checkbox"/>
VS	VALDAL, KJELL S	701 BRICKELL AVE, STE 3200	MIAMI FL 33131	<input type="checkbox"/>
PSD	BRATSBERG, OVE A	701 BRICKELL AVE, STE 3200	MIAMI FL 33131	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
VS	Valdal, Kjell S	660 N. Central Expressway, Ste 250	Plano, TX 75074	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PSD	Bratsberg, Ove A	1 SE 3rd Ave, Ste 1980	Miami, FL 33131	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Ove Bratsberg* Date: 2-1-2001 Daytime Phone #: 305-377-8370  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)