## 2000 UNIFORM BUSINESS REPORT (UBR) FILED May 01, 2000 8:00 am Secretary of State **DOCUMENT # K50937** 1. Entity Name CYPRESS TRADING COMPANY, INC. 05-01-2000 90006 011 \*\*\*150.00 Principal Place of Business Mailing Address 2975 NW 77TH AVE 2975 NW 77TH AVE MIAMI FL 33122 MIAMI FL 33122-1409 721640 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0124472 Not Applicable Country Zip \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FERNANDO RODKIGUEZ-VILA Street Address (P.O. Box Number is Not Acceptable) <del>--Franzblau, Danië</del>t" 2975 NW 77TH AVE. MIAMI FL 33122 Zip Code City 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. 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) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change ☐ Addition Delete TITLE RODRIGUEZ-VILA, FERNANDO NAME NAME STREET ADDRESS STREET ADDRESS 2975 NW 77TH AVE. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Delete Change Addition DVP TITLE TITLE NAME SUGRANES, ROSA ÑAME STREET ADDRESS STREET ADDRESS 2975 NW 77TH AVE. CITY-ST-7IP CITY-ST-ZIP MIAMI FL Change ☐ Addition TITLE Delete TITLE DP NAME ROHRER, TODD NAME STREET ADDRESS STREET ADDRESS 2975 NW 77TH AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Addition ☐ Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE

I hereby certify that the information supplied with this fitting 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 truetee 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 a supplied with this fitting to the receiver or truetee empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

Envisor Rodinez-VIVA VP& tecrety