2003 FOR PROFIT CORPORATION

FILED Apr 28, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) L30549 DOCUMENT # 1. Entity Name 04-28-2003 90306 032 ***150.00 NAVATECH ELECTRONICS CORPORATION Principal Place of Business Mailing Address 3103 NW 20TH ST 3103 NW 20TH ST MIAMI FL 33142 MIAMI FL 33142 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0157414 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FERNANDEZ, NELSON Street Address (P.O. Box Number is Not Acceptable) 3103 NW 20TH ST **MIAMI FL 33142** 3103 NW 206 the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this statement f the obligations of registered Signature, typed or pa FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. Sanchez, Orestes Delete Change ☐ Addition TITLE TITLE RUIZ, ORLANDO NAME NAME 3103 N.W. 20 ST. 3103 NW 20st STREET ADDRESS STREET ADDRESS **MIAMI FL 33142** CITY-ST-ZIP CITY-ST-ZIP Miami, FlA ☐ Delete ☐ Addition TITLE Fernandez, Nelson SANCHEZ, ORESTES E. NAME NAME 3103 N.W. 20 ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33142 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Fernandez, Mulson JR 3103 NW 205t FERNANDEZ. NELSON NAME NAME STREET ADDRESS 3103 N.W. 20TH STREET STREET ADDRESS Mumi CI MIAMI FL CITY-ST-ZIP CITY-ST-ZIP 33142 VPD TITLE ☐ Change ☐ Addition TITLE ☐ Delete FERNANDEZ, NELSON JR. NAME NAME 3103 N.W. 20 STREET STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like employered.

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

NAME

MIAMI FL 33142

☐ Delete

☐ Delete

☐ Change

☐ Addition

☐ Addition