FILED Mar 25, 2004 8:00 am **Secretary of State** 03-25-2004 90014 019 ***150.00

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DOCUMENT # P00000086535 1. Entity Name CTU HOLDINGS, INC. Principal Place of Business Mailing Address 54022182 14600 SOUTHWEST 82ND COURT 14600 SOUTHWEST 82ND COURT SUITE B SUITE B MIAMI, FL 33158 MIAMI, FL 33158 2. Principal Place of Business 7362 Nω 3. Mailing Address 1.W.34S7 34 57 73 6 Q Suite, Apt. #, etc. 03172004 Chg-P CR2E034 (10/03) Applied For 4. FEI Number City & State City & State MIGM 65-1052780 Not Applicable Country U. S Zip \$8.75 Additional 5. Certificate of Status Desired 3122 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent UNTIAGA, CANDIDO 5853 SW 32 ST. MIAMI, FL 33155 Zio Code 33/シン City Migmi 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _ (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE THE ☐ Delete urtiaga, Candid NAME URTIAGA, CANDIDO J NAME 14600 SOUTHWEST 82ND COURT STREET ADDRESS STREET ADDRESS Palmetto Bay, City-St-ZiP MIAMI, FL 33158 CITY-ST-ZIP 517 Urtiaga 85613W Change Addition Delete TITLE TITLE URTIAGA, TERESA C NAME NAME 14600 SOUTHWEST 82ND COURT STREET ADDRESS STREET ADDRESS MIAMI, FL 33158 C!TY-ST-ZIP Palmetto Bou. CITY-ST-ZIP Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-2IP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete [] Change ☐ Addition TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS C:TY-ST-ZIP CiTY-ST-ZiP Addition ☐ Change TITLE Dalete ... TITLE NAME NAME STREET ADDRESS STREET ADDRESS C!TY-ST-ZIP GHY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR