FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2003 8:00 am
Secretary of State
03-11-2003 90143 012 ***150.00

DOCUMENT # P01000029884

1. Entity Name

ISLOTE CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
201 S. BiscayneBlvd.	201 S. Biscayne Blvd.
Suite, Apt. #, etc.: Suite 3400	Suite, Apt. #, etc.: Suite 3400
City & State: Miami, FL 33131	City & State: Miami, FL
Zip: 33131 Country: USA	Zip: 33131 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1106747 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Ferrell Group Corporate Services, LLC

Street Address (P.O. Box Number is Not Acceptable): 201 S.Biscayne Blvd., Suite3400

City: Miami **FL** Zip Code: 33131

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: Ferrell Group Corporate Services, LLC By: Sheri E. Nott Asst. Secretary 03/06/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPS De la Rocha, Ignacio 201 S.Biscayne Blvd., Ste.340 MIAMI, FL 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT De la Rocha, Laura 201 S. Biscayne Blvd, Ste.340 Miami, Florida 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS Del Valle, Ignacio G. 201 S. Biscayne Blvd. Ste.340 Miami, Florida 33131
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Ignacio De la Rocha as Asst. Sec. 3/5/03 305-371-8585

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #