2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P04059 DOCUMENT

1. Entity Name

ALPHATUR N.V., CORPORATION



FILED Jan 21, 2003 8:00 am Secretary of State 01-21-2003 90206 003 ***158.75

| Zip Country Zip Country 5. Ce | CHECK HERE IF MAKING CHANGES FEI Number 59-2463614 Applied For Not Applicable |
|---|---|
| Suite, Apt. #, etc. City & State City & State Country Zip Country 5. Ce 6. Name and Address of Current Registered Agent 7. Name | CHECK HERE IF MAKING CHANGES FEI Number 59-2463614 Applied For Not Applicable |
| City & State City & State 4. FE Zip Country Zip Country 5. Ce 6. Name and Address of Current Registered Agent 7. Na | FEI Number 59-2463614 Applied For Not Applicable |
| Zip Country Zip Country 5. Ce 6. Name and Address of Current Registered Agent 7. Na | 59-2463614 Not Applicable |
| 6. Name and Address of Current Registered Agent 7. Na | |
| | Certificate of Status Desired \$8.75 Additional Fee Required |
| Name | Name and Address of New Registered Agent |
| | |
| HASSAN, MF 888 BRICKELL AVE PH Street Address (P.O. Box | Box Number is Not Acceptable) |
| MIAMI FL 33131 City | FL Zip Code |
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tale if applicable. (NOTE: Registered Agent signature required when reins) FILE NOW!!! FEE IS \$150.00 | |
| After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State | 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. |
| | DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |
| TITLE PVS Delete TITLE NAME MEZERHANE, NELSON NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE TD Delete TITLE NAME MEZERHANE, NELSON STREET ADDRESS CITY-ST-ZIP MIAMI FL Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE VAS Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE AT Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE A Delete TITLE NAME HASSAN, MOSTAFA F STREET ADDRESS CITY-ST-ZIP MIAMI FL Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | ☐ Change ☐ Addition |
| Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | ☐ Change ☐ Addition |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

17/03