## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

JATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

## May 22, 2000 8:00 am Secretary of State DOCUMENT # P93000020381 NIBRA TRADING CORP. 05-22-2000 90008 050 \*\*\*150.00 Principal Place of Business Mailing Address ONE S.E. THIRD AVE. ONE S.E. THIRD AVE. Gucas. **SUITE 1980 SUITE 1980** MIAMI FL 33131-1704 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number \_City\_&\_State 65-0407113 Not Applicable Zip Country \$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 Name AMKGS REGISTERED AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 1980 SUNBANK INTERNATIONAL CENTER ONE SOUTHEAST THIRD AVENUE MIAMI FL 33131 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) 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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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 11. OFFICERS AND DIRECTORS 12. ☐ Change Delete PINATE, REYNALDO NAME NAME Carlos J. Ruiz CALLE LONDRES EDIFICIO BANCO VENEZOLANO DE STREET ADDRESS STREET ADDRESS Calle Londres Edificio Banco CITY-ST-ZIP CARACAS, VENEZUELA CITY-ST-ZIP 1. Venezolano de TITLE ☐ Change Addition ☐ Delete TITLE Caracas, Venezuela ESTEVEZ, ERNESTO NAME NAME CALLE LONDRES EDIFICIO BANCO VENEZOLANO DE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CARACAS, VENEZUELA ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP . ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP J. C. Addition ☐ Delete ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 of trustee empowered to execute this report as required by Chapter (3). Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an applicase, with all other like empowered.

FILED