2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2000 8:00 am
Secretary of State
05-19-2000 90087 019 ***158.75

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Entity Name

DAINY INTERNATIONAL CORPORATION

Principal Place of Business	Mailing Address
9990 SW 77th Ave Ste 209 Miami FL 33156 US	9990 SW 77th Ave Ste 209 Miami FL 33156

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Country / Zip / Country	Country

4. FEI Number: 65-0669248 — Applied For / Not Applicable

5. Certificate of Status Desired: X — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FRIEDHOFF, JOHN H 100 SE 2nd STREET 17th FLOOR MIAMI FL 33131	Name Street Address (P.O. Box Number is Not Acceptable) City / Zip Code

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.

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

The corporation is eligible to satisfy its intangible filing requirement and elects to do so. (See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
D ☐ Delete BONELLO, DANIEL RUA BARBARA ELEODORA 353 AP. 81 SAO PAULO SP 05440-040 BRAZIL	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
D ☐ Delete MENINI, EDMO A. 8260 SW 141st STREET MIAMI FL 33158	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition
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☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ Change ☐ Addition

CR2E034 (9.99)

I 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 11 or Block 12 above, or on an attachment with an address, with all other like empowered.

Edmo Alves Menini — 04/25/2000 — (305) 598 7558

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

EDMO ALVES MENINI