2004 **FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2004 8:00 am
Secretary of State
04-28-2004 90185 019 ***150.00

DOCUMENT # P97000072260

1. Entity Name
Mega Track International, Corp

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94069782

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2. Principal Place of Business	3. Mailing Address
8567 Coral Way	8567 Coral Way
Suite, Apt. #, etc. PMB 376	Suite, Apt. #, etc. PMB 376
City & State Miami, Fl.	City & State Miami, Fl
Zip 33155 Country USA	Zip 33155 Country USA

4. FEI Number 65-0776570 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent
Name Jose Miguel Lofano
Street Address (P.O. Box Number is Not Acceptable) 8567 Coral Way #376
City Miami FL Zip Code 33155

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

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

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

11. OFFICERS AND DIRECTORS

TITLE	P/S/D
NAME	Lofano, Jose Miguel
STREET ADDRESS	8567 Coral Way PMB 376
CITY-ST-ZIP	Miami Fl 33155
TITLE	V/T/D
NAME	Boromei, Alicia Irma
STREET ADDRESS	8567 Coral Way PMB 376
CITY-ST-ZIP	Miami Fl 33155
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NAME	
STREET ADDRESS	
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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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: J. Lofano 4/26/04 305-220-2022
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #