2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

May 01, 2003 8:00 am Secretary of State P98000045624 DOCUMENT # 05-01-2003 90341 013 ***150.00 1. Entity Name EXCITING WEAR CORPORATION Principal Place of Business Mailing Address 815 WASHINGTON AVE 8500 WEST FLAGLER ST **MIAMI FL 33139** B-208 MIAMI FL 33144 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0847081 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALVARO CASTILLO B., P.A. Street Address (P.O. Box Number is Not Acceptable) 1390 BRICKELL AVE, STE 200 **MIAMI FL 33131** City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D/PTITLE ☐ Delete ▼ Change Addition Eduardo Pereyra NAME FERNANDEZ, GUSTAVO M NAME 815 Washington Avenue 815 WASHINGTON AVE STREET ADDRESS STREET ADDRESS South Beach, FL 33139 CITY-ST-ZIP SOUTH BEACH FL 33139 CITY-ST-ZIP TITLE ☐ Delete TITLE D/VPK Change ☐ Addition Gustavo Manuel Fernandez NAME FERNANDEZ, GUSTAVO M NAME 815 Washington Avenue STREET ADDRESS 1815 Washington Avenue STREET ADDRESS SouthBeach, FL CITY-ST-ZIP SOUTH BEACH FL 33139 CITY-ST-ZIP TITLE Delete · TITLE D/TChange ▼ Addition Miguel Angel Azzaro NAME NAME 815 Washington Avenue STREET ADDRESS STREET ADDRESS South Beach, FL 33139 CITY-ST-ZIP CITY-ST-ZIP TITLE DIS Addition TITLE Delete ☐ Change Maria Elisa Mechano NAME NAME 815 Washington Avenue STREET ADDRESS STREET ADDRESS South Beach, FL 33139 CITY-ST-ZIP CITY-ST-ZIP सुध ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITI F Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 supplied entail report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 Block 11 if

CITY-ST-ZIP

SIGNATURE:

CITY-ST-71P