FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 16, 2001 8:00 am Secretary of State DOCUMENT # P99000110335 1. Entity Name 05-16-2001 90254 006 ***150.00 PICABO, INC. Principal Place of Business Mailing Address 2247 NW 20 STREET 2367 UNIVERSITY DR. A0068595 MIAMI, FL 33142 **CORAL SPRINGS FL 33065** 2. Principal Place of Business 3. Mailing Address 2247 NW 20TH STREET Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0972470 MIAMI, FL Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired -33142 -USA-Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHUEH-YANN CHIEN, SONG Street Address (P.O. Box Number is Not Acceptable) 6361 COW PEN ROAD, APT #T-212 2367 UNIVERSITY DR. CORAL SPRINGS FL 33065 MIAMI 8. The above named entity submits this statement for the purpose of changing its registered office of 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Delete Addition LÍN, JONATHAN Y.C. NAME NAME STREET ADDRESS 6361 COW PEN ROAD, APT #T-212 2367 UNIVERSITY DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33065 MIAMI, FL 33014 TITLE ☐ Delete TITLE NAME CHUEH-YANN CHIEN, SONG NAME STREET ADDRESS 6361 COW PEN ROAD, APT #T-212 STREET ADDRESS 2367 UNIVERSITY DR. CITY-ST-7IP MIAMI, FL 33014 CITY-ST-ZIP CORAL SPRINGS FL 33065 TITLE ☐ Delete TITLE Сhange Addition NAME NAME STREET ADDRESS STREET ADDRESS क्षी अध्यक्ष च CITY-ST-7IP CITY-ST-ZIP 195 <u>20 | 01</u> TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS JERS AND O'F CITY-ST-ZIP City-ST-ZIP or like the first that the control of ∀¹ 😉 Delete FILLTEWALL IN S 0. Election Carrosign F atciprestal in Visites of electric stinor archite. The away ENAMETS STAMPLY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP an step votest al. −CITY+ST+ZIP---TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME: - DIMOG STREET ADDRESS STREET ADDRESS

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 of 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 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

(305) 635-1832