FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 4:23

DOCUMENT # V62807 (5)

1. Corporation Name
BESTUNA, INC.

Principal Place of Business	Mailing Address
2601 S BAYSHORE DR SUITE 1225 MIAMI FL 33133	2601 S BAYSHORE DR SUITE 1225 MIAMI FL 33133

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/10/1992
3a. Date of Last Report: 08/09/1994

2. Principal Place of Business	2a. Mailing Address
21 7225 N.W. 25th Street	26 7225 N.W. 25th Street
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Miami, Florida	28 City & State: Miami, Florida
24 Zip: 33122 25 Country: USA	29 Zip: 33122 30 Country: USA

4. FEI Number: 65-0402637 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
E.H.G. RESIDENT AGENTS, INC. 2601 S BAYSHORE DR SUITE 1225 MIAMI FL 33133	61 Name 62 Street Address (P.O. Box Number is Not Acceptable): 5100 Town Center Circle 63 Suite 330 64 City: Boca Raton FL 65 Zip Code: 33486

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	D ☒ Change ☐ Addition
NAME	CEVALLOS, CARLOS	12 NAME	
STREET ADDRESS	2601 SOUTH BAYSHORE DR, #1225	13 STREET ADDRESS	7225 N.W. 25th Street
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	Miami, FL
TITLE	P/D	21 TITLE	☐ Change ☐ Addition
NAME	David Cevallos	22 NAME	
STREET ADDRESS	7225 N.W. 25th Street	23 STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33122	24 CITY-ST-ZIP	
TITLE	S/D	31 TITLE	☐ Change ☐ Addition
NAME	Medardo Cevallos	32 NAME	
STREET ADDRESS	7225 N.W. 25th Street	33 STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33122	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	Alberto Cevallos	42 NAME	
STREET ADDRESS	7225 N.W. 25th Street	43 STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33122	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or added to the report with my address.

SIGNATURE: David Cevallos, President 2/9/95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Title — Daytime Telephone #

0134424 CP