2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 23, 2001 8:00 am Secretary of State DOCUMENT # P98000044750 1. Entity Name NETUNO TRADING GROUP, INC. 04-23-2001 90225 033 ***158.75 Mailing Address Principal Place of Business 2050 N.W. 70 AVE. 2050 NW 70 AVE **MIAMI FL 33122** MIAM! FL 33122

Country

Name

DO NOT WRITE IN THIS SPACE

65-0837236

7. Name and Address of New Registered Agent

4. FEI Number

5. Certificate of Status Desired

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Mailing Address

City & State

6. Name and Address of Current Registered Agent

Suite, Apt. #, etc.

same"

2. Principal Place of Business

& State

SIGNATURE:

SIGNATURE AND TYPED OF P

1341 NW 79 TELR

BONALDO,-LUCIANO~

Street Address (P.O. Box Number is Not Acceptable) 1430 N.E. 4TH COURT. **BOCA RATON FL 33432** Zip Code City FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Director- President Delete TITLE TITLE BONALDO, LUCIANO NAME NAME Bonaldo, walano 1430 N.E. 4 COURT STREET ADDRESS STREET ADDRESS 1430 NE 4 COUR BOCG RATON FL CITY-ST-ZIP 3432 CITY-ST-ZIP **BOCA RATON FL 33432** Director- Vice President ☐ Addition **☆** Change Delete TITLE TITLE PASTOR, LUIS ALBERTO NAME Luis Alberto Pastor NAME 4SIO Main STREET #11-108 STREET ADDRESS 9012 N.W. 146 TERRACE STREET ADDRESS CITY-ST-ZIP mignitakes FL 33014 CITY-ST-ZIP **MIAMI FL 33018** Change Director - TREASURER Addition TITLE Delete NAME Quilherme Colaferri NAME #702 STREET ADDRESS 34_STREET SS 48 STREET ADDRESS CITY-ST-ZIP FLORIDA 33137 CITY-ST-ZIP Change Addition A ☐ Delete TITLE Director - Secretary NAME Catalina I. Pastor NAME 6510 mainstreet # 11-108 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Miami Lakes, FL 33014 CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 employered 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 employered.

Catalina I. Paston

NTED NAME OF SIGNING OFFICER OR DIRECTOR