FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 20, 2002 8:00 am Secretary of State P01000051128 DOCUMENT # 1. Entity Name 05-20-2002 90025 039 ***150.00 V & V TRADING CORP. Mailing Address Principal Place of Business 8181 NW 36TH STREET 8181 NW 36TH STREET SUITE 20-F SUITE 20-F MIAMI FL 33166 MIAMI FL 33166 2. Principal Place of Business reasure Dr DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65 -Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORTEZ, JANET W Street Address (P.O. Box Number is Not Acceptable) 8181 NW 36TH STREET SUITE 20-F Zip Code **MIAMI FL 33166** 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. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change ☐ Delete TITI F TITLE NAME IVANOV, VASSIL NAME PANAJOT VOLOV STR. #7A FLOOR 1 APT. 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 1527 SOFIA, BULGARIA CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE NAME CORTEZ, JANET W NAME 8181 NW 36TH STREET #20-F STREET ADDRESS STREET ADDRESS CITY-ST-7IP **MIAMI FL 33166** CITY-ST-ZIP Addition ☐ Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE

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 Block 12 if chapter 607 on an attackment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADORESS

CITY-ST-ZIP

MINATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1. CORTEZ

4-28.02 305 594 263