

IT CORPORATION BUSINESS REPORT (UBR)

May 17, 2002 8:00 am
Secretary of State

05-17-2002 90033 036 ***150.00

SENT # P01000026521

Alglobeda Ocho, Inc.

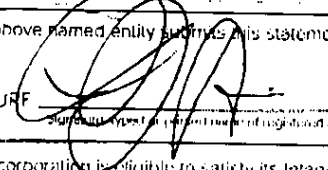
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 286 Seaview Drive Suite, Apt. #, etc. C-3 City & State Key Biscayne, FL Zip 33149 Country USA		3. Mailing Address 286 Seaview Drive Suite, Apt. #, etc. C-3 City & State Key Biscayne, FL Zip 33149 Country USA		4. FEI Number 65-1082954 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				DO NOT WRITE IN THIS SPACE	

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7. Name and Address of Current Registered Agent Name Lazaro J. Perez Street Address (P.O. Box Number is Not Acceptable) 3211 Ponce de Leon Blvd. Suite 305 City Coral Gables FL Zip Code 33134	
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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  (NOTE: Registered Agent signature required when re-registering) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐	January 1 - May 1: Fee is \$150.00 After May 1: Fee is \$550.00 Amended UBR is \$81.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Gonzalez-Ubeda, Miguel Maria A. 1111 Crandon Blvd. #G-1005 Key Biscayne, FL 33149	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/2002 305/444,242