2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 585874

Entity Name: HUMCLA, INC.

City-St-Zip:

LAUDERHILL, FL 33319 US

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2500 N.UNIVERSITY DRV. 10264 W. SAMPLE RD SUITE 4 R CORAL SPRINGS, FL 33065 US SUNRISE, FL 33322 **New Mailing Address: Current Mailing Address:** P.O. BOX 15286 P.O. BOX 8956 PLANTATION, FL 33318 US CORAL SPRINGS, FL 33075 US FEI Number: 59-1846919 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: APARICIO, EDUARDO 3841 ENVÍRON BLVD. **APT 236** LAUDERHILL, FL 33319 US 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition APARICIO, MARA MRS Name: Name: AV 10 NORTE 18-35 APT 701 Address: Address: City-St-Zip: CALI, COLOMBIA, VA 00000 CO City-St-Zip: Title: Title: () Delete () Change () Addition Name: APARICIO, GONZALO MR Name: AV 10 NORTE 18-35 APT 701 Address: Address: CALI, COLOMBIA, VA 00000 CO City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition APARICIO, EDUARDO MR Name: Name: 3841 ENVIRON BLVD. APT 236 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: EDUARDO APARICIO M 04/29/2002