2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 02, 2004 8:00 am **Secretary of State** DOCUMENT # 589701 1. Entity Name 03-02-2004 90046 012 ***158.75 EXPORT PENINSULAR CORP. Mailing Address Principal Place of Business 785 CRANDON BLVD 785 CRANDON BLVD 24015539 SUITE 806 SUITE 806 KEY BISCAYNE FL 33149 KEY BISCAYNE FL 33149 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) MOORE Applied For City & State 4. FEI Number City & State 59-1852424 Not Applicable Zip Zip Country Country \$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 MORALES, LUZ A Street Address (P.O. Box Number is Not Acceptable) 17630 SW 4TH CT. PEMBROKE PINES FL 33029 Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE 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. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. CEOD Change ☐ Addition TITLE TITLE ☐ Delete ECHEUERRI, CESAR NAME NAME 785 CRANDON BLVD, STE 806 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **KEY BISCAYNE FL 33149** CITY-ST-ZIP Addition TITLE SD Delete TITLE ☐ Change ECHÉVERRI, CLARALUZ NAME STREET ADDRESS STREET ADDRESS 785 CRANDON BLVD., STE 806 KEY BISCAYNE FL 33149 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE D **⊠** Delete Stanley Oliver ECHEVERRI, GERMAN NAME STREET ADDRESS STREET ADDRESS 185 CRANDON BLVD, STE 806 CITY-ST-ZIP BISCYNE El 33149 CITY-ST-ZIP **KEY BISCAYNE FL 33149** ☐ Change ■ Addition ☐ Delete TITLE TITLE ECHEVERRI, OLGA L NAME NAME 785 CRANDON BLVD #806 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KEY BISCAYNE FL 33149 CITY-ST-ZIP TD Delete TITLE ☐ Change ☐ Addition TITLE Clemencia Echeverni MORALES, AMPARO NAME NAME 785 Crandon Blud. Suite 806 785 CRANDON BLVD, STE 806 STREET ADDRESS STREET ADDRESS KEY BISCAYNE FL 33149 view isiscence 1233149 CITY-ST-7IP CITY-ST-ZIP Addition ☐ Delete ☐ Change TITLE ECHEVERRI, FERNANDO NAME NAME 785 CRANDON BLVD, STE 806 STREET ADDRESS STREET ADDRESS KEY BISCAYNE FL 33149 CITY-ST-ZIP CITY-ST-ZIP 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED