2003 FOR PROFIT CORPORATION

FILED Mar 20, 2003 8:00 am § Secretary of State UNIFORM BUSINESS REPORT (UBR 845354 **DOCUMENT #** 1. Entity Name 03-20-2003 90141 006 ***150.00 CRISELTA INVESTMENTS, INC. Principal Place of Business Mailing Address 8275 SW 124 ST 9651 S.W. 77TH STREET TUU41647 PINECREST FL 33156 MIAMI FL 33173 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 52-1181751 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NUNEZ, TED Street Address (P.O. Box Number is Not Acceptable) 9651 S.W. 77TH STREET MIAMI FL 331第 73 - 3316 City 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** 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, 2003 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition DE MANZANILLA, ILUMINDA NAME NAME STREET ADDRESS CALLE 65 NUMBER 254-B STREET ADDRESS MERIDA, YUCATAN, MEXI CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS 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 eath; 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

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME: '

CITY-ST-ZIP

STREET ADDRESS

TITLE

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

Delete

☐ Change

Change

☐ Addition

Addition

1004/645 DOC#845354

ABOGADO GUSTAVO MONFORTE LUJAN, NOTARIO PURE ICO DEL PERADO, EN EJERCICIO, CON RESIDENCIA EN ESTA CAPITAL, TITUERE DE LA NOTABLACIDE DEL ANUMERO CUARENTA Y-OCHO.—

CERTIFICO: QUE LA FIRMA QUE OBRA EN EL PRESENTE DOCUMENTO FUE PUESTA ANTE-MI-POR LA SEÑORA ILUMINDA CASTILLO DE MANZANILLA Y ES LA MISMA QUE ACOSTUMBRA A USAR EN TODOS LOS ACTOS Y CONTRATOS EN QUE INTERVIENE.— MERIDA, YUCATAN A —

17 DE FEBRERO DEL 2,003.—

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