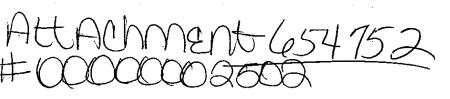
2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 15, 2001 8:00 am Secretary of State DOCUMENT # F0000002502 05-15-2001 90017 049 ***150.00 LW SERVICES CORPORATION, INC. Principal Place of Business Mailing Address 1221 BRICKELL AVENUE, SUITE 1740 1221 BRICKELL AVENUE, SUITE 1740 ひりないひゃ **MIAMI FL 33131** MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 6*5-1003520* Not Applicable Zip Country Zip 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 **GONZALO GIL** Street Address (P.O. Box Number is Not Acceptable) C/O LATIN VERTICAL VENTURES 1221 BRICKELL AVENUE, SUITE 1740 MIAMI FL 33131 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. 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. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition TITLE ☐ Delete TITLE GIL. GONZALO NAME NAME 1221 BRICKELL AVENUE, SUITE 1740 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP ☐ Change ☐ Addition VC TITLE TITLE □ Delete OLAVARRI, PEDRO NAME NAME STREET ADDRESS 1221 BRICKELL AVENUE, SUITE 1740 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 _ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 empored at the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an adject of the empowered.



A & E GARCIA, P.A.

Certified Public Accountants 2588 SW 27th. Avenue Miami, FL 33133-2143

Tel.: (305)444-2213 Fax: (305)445-5623

Date:	March 29	, 2001	
LVV	Services	Corp.	Inc.

INSTRUCTIONS FOR FILING

2001 Uniform Business Report

Due on or before	: APRIL 30, 2001
\$ 150.00	(X) payable to the DEPARTMENT OF STATE
Sign, date and ma	il the 2001 Uniform Business Report (UBR) to:

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

(envelope enclosed)