2002 Uniform Business Report (UBR)

SIGNATURE:

Mar 28, 2002 8:00 am Secretary of State F00000004735 DOCUMENT # 1. Entity Name 03-28-2002 90783 035 ***150 00 CORAL REEF TECHNOLOGIES INC. Mailing Address Principal Place of Business 1100 LEE WAGENER BLVD 1100 LEE WAGENER BLVD #351 #351 FORT LAUDERDALE FL 33315 FORT LAUDERDALE FL 33315 2. Principal Place of Business 3. Mailing Address WAGENER BLYD 1100 LEE WAGENER BLVD 1100 LEE Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 346 #346 Applied For City & State City & State 4. FEI Number 65-1028661 AUDERDALE. Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 15 A 7.-Name and Address of New Registered Agent Name and Address of Current Registered Agent --BARRERA, JORGE A Street Address (P.O. Box Number is Not Acceptable) 6636 NW 178 TERRACE MIAMI FL 33015 Zip Code City 8. The above named entity sub~ 1; this statement for the n)se of changing its registered office or registered agent, or both, in the State of Florida. Signature, ped or printer name of register gugent and title if applicable (NOTE: Registered Agent signature required when reinstating) ATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. 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. (9/01) Change ☐ Addition PCDS ☐ Delete TITLE TITLE BARRERA, MICHAEL F NAME NAME 3801 SW 144 AVE. STREET ADDRESS STREET ADDRESS MIRAMAR FL CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME BARRERA, JORGE A NAME STREET ADDRESS STREET ADDRESS **6636 NW 178 TERRACE** CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 is changed, or on an attachment with an address, with a photor like empowered. me appears in Block 11 or Block 12 if

ABARRERA, VTD.

FILED