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Secretary of State
04-09-2003 90166 036 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

10061265

DOCUMENT # F01000002273

1. Entity Name
MW NETWORK, INC.

Principal Place of Business	Mailing Address
8350 N.W. 52ND TERRACE STE 407 MIAMI, FL 33166	8350 N.W. 52ND TERRACE STE 407 MIAMI, FL 33166

2. Principal Place of Business	3. Mailing Address
1000 BRICKELL AVE.	1000 BRICKELL AVE.
Suite, Apt. #, etc. 215	Suite, Apt. #, etc. 215
City & State MIAMI, FL.	City & State MIAMI, FL
Zip 33131 Country USA	Zip 33131 Country USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1091814 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RICARDO A. GONZALEZ & ASSOCIATES, P.A. 7270 N.W. 12TH STREET, P.H. 9 MIAMI, FL 33126	Name Street Address (P.O. Box Number Is Not Acceptable) City **FL** 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's signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to: Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RICARDO ALARCON, PABLO B DOM. MANOLETE NO. 9, LOMAS DE SOTELO C.P. NAUCALPAN, EDO. DE MEXICO,	☒ Delete	PD V S T ALBERTO J. ESCALONA 1000 BRICKELL AVE. SUITE 215 MIAMI, FL. 33131	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO VINAY, MARCEL PRO. BOS. DE REF. 200, CASA 120 LA PUNTA,MEXICO CITY,MEXICO,	☒ Delete	D ALBERTO J. ESCALONA 1000 BRICKELL AVE. SUITE 215 MIAMI, FL 33131	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCFO HERNANDEZ, WILFREDO 8350 N.W. 52ND TERRACE, STE. 407 MIAMI, FL 33166	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HERNANDEZ, WILFREDO 8350 N.W. 52ND TERRACE, STE. 407 MIAMI, FL 33166	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD ROBERTO VINAY, MARCEL SR. JULIAN ADAME 114, CASA 7, EL MOLINO MEXICO CITY, MEXICO,	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GONZALES, RICARDO A 7270 N.W. 12TN STREET, PH-9 MIAMI, FL 33126	☒ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

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.

SIGNATURE: _____ 4/4/03 (305) 324-2500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #