2002 UNIFORM BUSINESS REPORT (UBR)

Feb 21, 2002 8:00 am F01000003932 DOCUMENT # Secretary of State 1. Entity Name 02-21-2002 90172 039 ***150 00 SUSUA REALTY, INC. Principal Place of Business Mailing Address #C BROMELIA STREET, PARQUE DE BUCARE 4921 KENSINGTON PARK BOULEVARD ORLANDO FL 32819 **GUAYANABO PR 00969** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 66-0. Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7.-Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SOLER, JACKELINE Street Address (P.O. Box Number is Not Acceptable) 4921 KENSINGTON PARK BLVD. ORLANDO FL 32819 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees ₃(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 Change ☐ Delete TITLE SOLER-AGOSTINI, SANTIAGO C NAME NAME #C BROMELIA STREET, PARQUE DE BUCARE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **GUAYANABO PR 00969** CITY-ST-7IP TITLE ☐ Change ☐ Addition ☐ Delete NAME SOLER-AGOSTINI. JEANNETTE NAME STREET ADDRESS STREET ADDRESS #172 MIMOSA STREET, SANTA MARIA CITY-ST-ZIP CITY-ST-ZIP SAN JUAN PR 00927 ☐ Change ☐ Addition ☐ Delete TITLE SD NAME NAME SOLER-AGOSTINI, MARIE-IVETTE #278 TUBINJEN STREET EXT. COLLEGE PARK STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE SAN JUAN PR 00927 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME SOLER-AGOSTINI, JACKELINE NAME STREET ADDRESS STREET ADDRESS 4921 KENSINGTON PARK BLVD. CITY-ST-ZIP ORLANDO FL 32819 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. Thereby 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 if

changed, or on an attach

SIGNATURE

FILED