06-19-2001 90004 001 ***150.00 -2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F19670 SECRETARY OF STATE TYISION OF CORPORATIONS SUPER SERVICE FINA, INC. 01 AUG -7 AM 9: 46 Principal Place of Business Mailing Address ADULOUS 6343 MIRAMAR PARKWAY 6343 MIRAMAR PARKWAY MIRAMAR FL 33023 MIRAMAR FL 33023 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, ctc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2072910 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODRIGUEZ, EDMUNDO - ... Street Address (P.O. Box Number is Not Acceptable) 5250 SW 4 CT. PLANTATION FL 33317 City Zip Code 3. 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 Signature, typed or printed name ni registered agent and title il applicable. (NOTF, Registered Agent Algneture required when reinstating) 10. Election Campaign Financing 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DP ☐ Delete TITLE TITLE NAME RODRIGUEZ, EDMUNDO NAME STREET ADDRESS STREET ADDRESS 5250 SW 4TH CT CITY-ST-ZIP CITY-ST-21P PLANTATION, FL 0 TITLE ☐ Delete TITLE Change - Addition RODRIGUEZ, MIRTA NAME NAME STREET ADDRESS STREET ADDRESS 5250 SW 4TH CT CITY-S1-71P CITY-ST-7IP PLANTATION, IFL 00000 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CATY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Addit on Delete 🗆 TITLE NAME NAME STREET ADORESS STREET ACCRESS CITY-S1-ZIP CITY-ST-ZIP TITLE Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 each; 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 attachment with an address, with all other like empowered.

Super Service Fina, Inc 5250 SW 4th Ct Plantation, FL 33317 7/24/2001

Shawn Toner Division of Corporations PO Box 6327 Tallahassee, Fl 32314

Attn: Shawn Toner-

Dear Shawn Toner: Subject:F19670

Per your request I am writing this letter to explain the reasons that my father failed to renew his UBR on time. Unfortunately this has been a difficult year for him in January his mother died and shortly thereafter he became very ill. He was diagnosed with diabetes, high blood pressure and depression. As a result he sold the Business but would like to keep the Corporation. He sold the company on 6/22/2001. I think that if you review all the prior years record we have never asked for an exception. I hope that you will be able to grant an exception and allow the 150.00 payment. Please feel free to call me at 954 553 0200. Should you have any additional questions.

Respectfully

Edmundo Rodriguez