FILED

2002 Uniform Business Report (UBR)

changed, or on an attact

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Mar 12, 2002 8:00 am Secretary of State F23873 DOCUMENT # 1. Entity Name 03-12-2002 90274 046 ***150 00 ADIGO ENGINEERING, INC. Principal Place of Business Mailing Address 7922 N W 64TH STREET 7922 N W 64TH STREET MIAMI FL 33166 MIAM! FL 33166 2. Principal Place of Business 3. Mailing Address 7922 NW6 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-2109555 Not Applicable Country 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 Name MORALES, JESUS Street Address (P.O. Box Number is Not Acceptable) 7922 N W 64TH STREET **MIAM! FL 33166** Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: flagistered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 \Box Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (9/01)Delete Change Addition TITLE TITLE MORALES, MILAGROS NAME NAME CR2E034 7922 NW 64TH ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33166** CITY-ST-ZIP DP ☐ Addition TITLE Delete TITLE [] Change MORALES, JESUS NAME STREET ADDRESS 7922 NW 64TH ST STREET ADDRESS CITY-ST-ZIP MIAMI FL 33166 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME MORALES, DANIEL NAME STREET ADDRESS 7922 NW 64TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33166 ☐ Delete Change □ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRES CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition 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 if