

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90316 005 ***150.00

DOCUMENT # **F9500005341**

1. Entity Name

Sonolux Inc.



DO NOT WRITE IN THIS SPACE

94056546

2. Principal Place of Business

1320 S. Dixie Highway

3. Mailing Address

Suite, Apt. #, etc.

Suite 760

DO NOT WRITE IN THIS SPACE

City & State

Coral Gables

City & State

Florida

4. FEI Number

65-0631665

Applied For

Not Applicable

Zip

33146

Country

USA

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Jesús Duran

Street Address (P.O. Box Number is Not Acceptable)

1320 S. Dixie Highway Suite 760
Coral Gables FL 33146

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PS
Duran, Jesús
1320 S. Dixie Highway #760
Coral Gables, FL 33146

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Heredia, Jaime
call 9 # 65-40
BOGOTA, Colombia

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

HT Culm
President

04/16/04

Date

Daytime Phone #

305-
740-0116

CR2E034B (12/02)