2007 FOR PROFIT CORPORATION

FILED Aug 31, 2007 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # F99000003810 1. Entity Name 08-31-2007 90002 023 ***158.75 PACE AMERICAS LIMITED INC. Principal Place of Business Mailing Address 3701 FAU BLVD. 3701 FAU BLVD. BOCA RATON, FL 33431 BOCA RATON, FL 33431 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07182007 CR2E034 (12/06) Cha-P City & State City & State 4. FEI Number Applied For 52-2184120 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution Added to Fees corporation did not receive the prior notice. Due by September 14, 2007 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE X Delete TITLE ☐ Change NAME DYSON, JOHN NAME Gaydon, Neil STREET ADDRESS BODALAIR, SANDFORD LANE, HURST STREET ADDRESS Victoria Road, Saltaire CITY-ST-ZIP BERKSHIRE, UNITED KINGDOM, RQ10 0SU CITY-ST-ZIP Shipley, West Yorksire BD18 3LF UK TITLE ☐ Delete TITLE X Change ☐ Addition Dixon, Anthony John Victoria Road, Saltaire NAME DIXON, ANTHONY JOHN NAME STREET ADDRESS MALLARD COTTAGE, 5 COMMON ROAD, SKIPWITH STREET ADDRESS CITY-ST-7IP SELBY YORK, UNITED KINGDOM, Y08 55Q CITY-ST-ZIP Shipley, West Yorkshire BD18 3LF UK TITLE ☐ Delete TITLE ■ Addition Pulli, Michael V. PULLI, MIKE NAME NAME STREET ADDRESS 6241 BRAVA WAY STREET ADDRESS 3701 FAU Boulevard, Suite 200 CITY-ST-ZIP BOCA RATON, FL 33433 CITY-ST-ZIP Boca Raton, FL 33431 TITLE Delete TITLE □ Change X Addition NAME NAME Valdivieso, Juan STREET ADDRESS STREET ADDRESS 3701 FAU Boulevard, Suite 200 CITY-ST-ZIP CITY-ST-7IP Boca Raton, FL 33431 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Delete Channe

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

₽ RINTED NAME OF SIGNING OFFICER OR DIRECTOR

Juan Valdivieso

8/22/07

Date

561-995-6000

Daytime Phone #