SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED DOCUMENT # H67799** May 01, 2000 8:00 am 1. Entity Name MUSTANG CORPORATION Secretary of State 05-01-2000 90401 007 \*\*\*150.00 Mailing Address Principal Place of Business 1500 NW 62ND STREET 1500 NW C2ND STREET 102 FT LAUDERDALE FL 33309 1848 FT-1-AUDERDALE FL 93309 us UŞ 2. Principal Place of Business 3. Mailing Address 255 Commercial Blvd, 255 Commercial Blvd. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 200 200 City & State 4. FEI Number Applied For City & State 59-2553380 Lauderdale By The Sea FL Lauderdale By The Sea, FLNot Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33308-4419 Broward 33308-4419 Broward 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Miguel San Miguel Street Address (P.O. Box Number is Not Acceptable) 255 Commercial Blvd. - CROCQUET, MARC-- 1500 NW 62ND STREET 102 Suite 200 FT LAUDERDALE FL 33309 City Lauderdale By The Sea Zip Code 33308-4419 this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida The above named entity(submits) (NOTE: Registered Agent signature required when reinstating) 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 Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change ☐ Addition PD ☐ Delete TITLE TITLE CAVENG, PHILIPPE NAME NAME STREET ADDRESS 255 Commercial Blvd., Suite 200 STREET ADDRESS 3101 N FEDERAL HWY, 6TH FL-CITY-ST-ZIP Lauderdale By The Sea, FL CITY-ST-ZIP FT LAUDERDALE FL 33306 33308-4419 Delete TITLE Change TITLE CAVENG, FRANCOISE NAME 255 Commercial Blvd., Suite 200 STREET AODRESS STREET ADDRESS 1500-NW-62ND-STREET-SUITE 102 33308-4419 Lauderdale By The Sea, FL CITY-ST-7IP CITY-ST-ZIP FT LAUDERDALE FL 33309-☐ Change TITLE - . . ☐ Delete TITLE **NAME** STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE 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 changed, or on an attachment with an actoress, with all other like empowered.