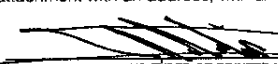


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90040 010 ***150.00

DOCUMENT # K50645 1. Entity Name MIAMI COLUMBUS HOLDING COMPANY, INC.					
Principal Place of Business 371 E FLAGLER MIAMI, FL 33131 US			Mailing Address 4100 JOY LAKE ROAD RENO, NV 89511		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0266590	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301				Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	CD	☒ Delete	TITLE	☐ Change ☐ Addition	
NAME	AL-DAHLAWI, M. AMIN		NAME		
STREET ADDRESS	4100 JOY LAKE ROAD		STREET ADDRESS		
CITY-ST-ZIP	RENO, NV 89511		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	AL-DAHLAWI, ABDULLAH		NAME		
STREET ADDRESS	4100 JOY LAKE ROAD		STREET ADDRESS		
CITY-ST-ZIP	RENO, NV 89511		CITY-ST-ZIP		
TITLE	PSTD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	AL-DAHLAWI, GHASSAN		NAME		
STREET ADDRESS	4100 JOY LAKE RD		STREET ADDRESS		
CITY-ST-ZIP	RENO, NV 89511		CITY-ST-ZIP		
TITLE	X	☐ Delete	TITLE	☐ Change ☒ Addition	
NAME	X		NAME	DV	
STREET ADDRESS	X		STREET ADDRESS	AL-DAHLAWI, TARIQ	
CITY-ST-ZIP	X		CITY-ST-ZIP	4100 JOY LAKE ROAD	
TITLE	X	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	X		NAME		
STREET ADDRESS	X		STREET ADDRESS		
CITY-ST-ZIP	X		CITY-ST-ZIP		
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			GHASSAN AL-DAHLAWI		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			FEBRUARY 12, 2004 775/849-9070 Date Daytime Phone #		