2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # K77094 Mar 12, 2000 08:00 AM 1. Entity Name **Secretary of State** LYDIA DESIGNS LTD., INC. Principal Place of Business Mailing Address 4367 N. FEDERAL HIGHWAY 4367 N. FEDERAL HIGHWAY SUITE 203 SUITE 203 FT LAUDERDALE FT LAUDERDALE FL FL 33308 US 33308 US 2. Principal Place of Business 3. Mailing Address 4367 N. FEDERAL HIGHWAY 4367 N. FEDERAL HIGHWAY Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SHITE 102 SHITE 102 City & State City & State 4. FEI Number Applied For ET LAUDERDALE FL FT LAUDERDALE FL 65-0147906 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33308 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SILVESTRY 2805 EAST OAKLAND PARK Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE 33306 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. 03/12/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE JS \$150.00 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2000 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. 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 TITLE DS Delete TILE DS X Change ☐ Addition COLON JORGE NAME COLON JORGE STREET ADDRESS 2805 EAST OAKLAND PARK #433 STREET ADDRESS 4367 N. FEDERAL HIGHWAY #104 CITY-ST-ZIP FT LAUDERDALE 33306 CITY-ST-ZIP FT LAUDERDALE \mathbf{FL} 33308 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME COLON, ABILIO X. NAME STREET ADDRESS 2805 EAST OAKLAND PARK #433 STREET ADDRESS CITY-ST-ZIF FT LAUDERDALE FI. 33306 CITY-ST-718 TITLE ☐ Delete TILE ☐ Change ☐ Addition NAME SILVESTRY, LYDIA M. NAME STREET ADDRESS 2805 EAST OAKLAND PARK #433 STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE 33306 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 address, with all other like empowered.

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