2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000007344

1. Entity Name
Comp Enterprises International, L.L.C.

FILED
01 FEB 12 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
8025 NW 36th St., #322 Miami, FL 33166	Same

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8025 NW 36th Street	same
Suite, Apt. #, etc.: Suite 322	Suite, Apt. #, etc.: Same
City & State: Miami, Florida	City & State: Same
Zip: 33166 Country: USA	Zip: Same Country: Same

4. FEI Number: 65-1020641 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Cuevas, Andrew Esq Cuevas & Rubin PA 9200 S. Dadeland Blvd Suite 603 Miami, Fl 33156	Name: Ramon A. Echeverri Street Address (P.O. Box Number is Not Acceptable): 8025 NW 36th Street Suite 322 City: Miami, FL Zip Code: 33166

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.

SIGNATURE: Ramon A. Echeverri DATE: 2/8/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

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-02/20/01--01103--002
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Ramon A. Echeverri 9200 S. Dadeland Blvd., Suite 603 Miami, Fl 33156 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Ramon A Echeverri 8025 NW 36th Street., Suite 322 Miami, Fl 33166 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E083 (11/00)

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Ramon A. Echeverri 2/8/01 (305) 468-8485
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #