2001 UNIFORM BUSINESS REPORT (UBR) May 04, 2001 8:00 am Secretary of State **DOCUMENT # L32420** 1. Entity Name BODY LINE INTERNATIONAL, INC. 05-04-2001 90025 030 ***150.00 Principal Place of Business Mailing Address 3191 CORAL WAY 3191 CORAL WAY SUITE 109 SUITE 109 MIAMI FL 33145 MIAMI FL 33145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0174078 Not Applicable Country Zip Country Zip **\$8.75** Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) DE LA PENA, VILLANUEVA **601 BRICKELL KEY DRIVE SUITE 705** 601 Brickell Keu Drive **MIAMI FL 33131** MIAM 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. Licardo Bajandas FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. Ebrieno Alejandro 601 Bii ciceli Key Dr. Addition CR2E034 (10/00) PD ☐ Change 🖄 Delete TITLE TITLE STE 705 MENENDEZ. GUILLERMO G NAME NAME 601 BRICKELL KEY DRIVE, SUITE 705 STREET ADDRESS STREET ADDRESS MIAMI, FL 33131 CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP STD ☐ Change ☐ Addition TITLE MENENDEZ, RUTH E NAME NAME 601 BRICKELL KEY DRIVE, SUITE 705 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete BAJANDAS, RICARDO NAME STREET ADDRESS 601 BRICKELL KEY DRIVE, SUITE 705 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE 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 arraydress, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

☐ Delete

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

Ricardo Bajandas 4/27/01 305-3

Daytime Phon

☐ Change

☐ Addition