2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

if changed, or on an attachment with an address, with all other like empowered

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Mar 17, 2008 08:00 A Secretary of State DOCUMENT # L39097 1. Entity Name RICARDO JOYERIA INC. Principal Place of Business Mailing Address 11048 W FLAGLER 11048 W FLAGLER **MIAMI FL 33174** MIAMI FL 33174 2. Principal Place of Business - No P.C. Box # 3. Ma'ling Address Suite, Apt. #. etc. Suite, Apt. #, atc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 65-0067503 Not Applicable Ζıp Country Z:p Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CONCEPCION, RICARDO Street Address (P.O. Box Number is Not Acceptable) 11048 W FLAGLER **MIAMI FL 33174** City 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 land accept the colligations of registered agent. SIGNATURE Signisture, typed or chiroid hamb of registmed agent and title ill approapie. ChOTE. Registried Agent's riphitum to juintin when reinstitlings DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trus: Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE Derete NAME CONCEPCION, RICARDO NAME 7920 SW 26TH ST STREET ADDRESS STREET ADDRESS CITY - ST-ZI? MIAMI FL CITY-ST ZIP TITLE ☐ Derete ☐ Change Addition NAME CONCEPCION, ONEIDA M. STREET ADDRESS 7920 SW 26TH ST STREET ADDRESS CHY-ST-ZE MIAMI FL CITY-ST-ZIP THEE DT De-ete THEE Change Addition SABUCO, MAURO NAME STREET ADDRESS 8931 SW 34TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-3IP MIAMI FL DS TITLE De-ete Change Addition PEREZ, HECTOR NAME NAME STREET ADDRESS 2990 SW 103RD AVE STREET ADDRESS MIAM! FL GITY-SI-ZIP CITY-S1-2(P) TITLE ☐ De ete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITUE T Delete ☐ Change Addition HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, 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 path that I am an efficer 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

CARDOCONCEPCION

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