2000 UNIFORM BUSINESS REPORT (UBR) **FILED DOCUMENT # M06514** Apr 24, 2000 8:00 am Secretary of State FAMARIS CORPORATION 04-24-2000 90114 050 ***150.00 Mailing Address Principal Place of Business 6801 N.W. 77 AVENUE 6801 N.W. 77 AVENUE SUITE 407 SUITE 407 MIAMI FL 33166-2849 MIAMI FL 33166-2849 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FÉI Number 59-2514115 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RIVERO, MARIO R. Street Address (P.O. Box Number is Not Acceptable) 6801 N.W. 77 AVENUE SUITE 407 MIAMI FL 33166-2849 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 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, 2000 Fee will be \$550.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition DPT TITLE ☐ Delete TITLE RIVERO, MARIO R. NAME 6801 N.W. 77 AVENUE, STE 407 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33166-2849 ☐ Addition ☐ Change TITLE ☐ Delete TITLE. NAME RIVERO, MARIO R., JR NAME STREET ADDRESS 4017 S.W. 10 STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33134 Change ☐ Addition ☐ Delete TITLE TITLE MAJOR, NEREIDA O NAME NAME STREET ADDRESS 7641 TAHITI LANE APT. 105 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE WORTH FL 33467 ☐ Change ☐ Addition DVS ☐ Delete TITLE TITLE NAME RIVERO, MARIA A NAME STREET ADDRESS STREET ADDRESS 8856 SW 5TH STREET CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33174-2471 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

this liling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is the and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director processed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if I hereby certify that the information indicatéd is report or supple of the corpora

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

Mario R. Rivero SED-NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

April 18, 2000

(305) 883-6000

☐ Change

☐ Addition