FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 06, 2002 8:00 am Secretary of State M20876 DOCUMENT # 1. Entity Name 05-06-2002 90058 022 ***158.75 A-1 EXPRESS INTERNATIONAL, INC. Principal Place of Business Mailing Address 1200 NW 78TH AVE. 1200 NW 78TH AVE. SUITE 112 SUITE 112 MIAMI FL 33126 MIAMI FL 33126 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2642968 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired XX 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODGRIGUEZ-JABARA, RAFAEL Street Address (P.O. Box Number is Not Acceptable) 1200 NW 78TH AVE. MIAMI FL 33126 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 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 ☐ Delete TITLE ☐ Addition ☐ Change RODRIGUEZ-JARABA, RAFAEL NAME NAME 1200 NW 78TH AVE., SUITE 112 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP ٧S ☐ Delete TITLE Change Addition NAME BEKERMAN, LEA NAME STREET ADDRESS 1200 NE 78TH AVE., SUITE 1132 STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP TITI E ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

SIGNATURE AND THE OFF

SIGNATURE: