2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # M31811 Apr 17, 2000 8:00 am Secretary of State 1. Entry Name DUO INTERNATIONAL INC. 04-17-2000 90048 014 ***150.00 Principal Place of Business Mailing Address 4300 MONROE STREET 4300 MONROE STREET PO BOX 7654 PO BOX 7654 HOLLYWOOD FL 34476-9327 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2672341 Not Applicable Country Zip 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 Name HENRIQUES, MARJORIE Street Address (P.O. Box Number is Not Acceptable) 4300 MONROE STREET HOLLYWOOD FL 33021 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. MARJORIE F. HENRIQUES (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 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 STENRIQUES MARSORIE Change 11380 SW 78 CIRCLE ST TITLE Addition ☐ Delete TITLE HENRIQUES, MARJORIE NAME NAME STREET ADORESS STREET ADDRESS 4300 MONROE STREET OCALA FL 34476 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Addition TITLE Change ☐ Delete TITLE TONG, TERESA WHAN NAME NAME STREET ADDRESS STREET ADDRESS 4000 TOWERSIDE TERR CITY-ST-ZIP CITY-ST-7IP MIAMI FL ASD ☐ Delete Addition TITLE TONG, KRISTINA WHAN NAME STREET ADDRESS STREET ADDRESS 4000 TOWERSIDE TERR CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Delete ☐ Change Addition TITLE TITLE TONG, LINCOLN WHAN NAME NAME STREET ADDRESS STREET ADDRESS 4000 TOWERSIDE TERR CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 an address, with all other like empowered.

MARJORIE F. HENRIQUES