FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 17, 2002 8:00 am Secretary of State M51495 DOCUMENT # 1. Entity Name 04-17-2002 90100 035 ***150.00 ARELLANO INVESTMENTS, INC. Principal Place of Business Mailing Address 15805 W. PRESTWICK PLACE 15805 W. PRESTWICK PLACE MIAMI LAKES FL 33014 MIAMI LAKES FL 33014 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 59-2806510 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ARELLANO, JESUSA R Street Address (P.O. Box Number is Not Acceptable) 15805 W. PRESTWICK PLACE MIAMI LAKES FL 33014 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) DATE 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE TITLE Change ☐ Addition □ Delete ARELLANO, JESUSA R. NAME NAME 915 W. 18 ST. STREET ADDRESS STREET ADDRESS HIALEAH FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME PRIETO, MIRIAM NAME STREET ADDRESS 1360 S BEACH BLVD. STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL CITY-ST-ZIP TITLE : ☐ · Delete · · TITLE Change ☐ Addition NAME BONILLA. PAUL NAME STREET ADDRESS 15805 W PRESTWICK PL STREET ADDRESS CITY-ST-ZIP MIAMI LAKES FL CITY-ST-ZIP ST TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME **BONILLA, MARIA** NAME STREET ADDRESS 15805 W PRESTWICK PL STREET ADDRESS CITY-ST-ZIP MIAMI LAKES FL CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME 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-7IP 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 an address, with all other like empowered.

SIGNATURE:

R. ARELLAND