2000 UNIFORM BUSINESS REPORT (UBR) FILED Feb 19, 2000 8:00 am Secretary of State DOCUMENT # M55633 1. Entity Name INTERNATIONAL PURCHASING & TRADING COMPANY CORPO 02-19-2000 90025 008 ***150.00 Principal Place of Business Mailing Address 2380 WEST 78TH ST 15476 NW 77TH CT HIALEAH FL 33016 STE - 320 ロサリルエンエリ MIAMI FL 33016-5823 2. Principal Place of Business 2380 West 78th Street 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0159446 Florida Not Applicable Hialeeh Country Country \$8.75 Additional Zip Zip 5. Certificate of Status Desired Fee Required 33016 USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Nafflan A. Villaran VILLARAN, JUAN A Street Address (P.O. Box Number is Not Acceptable) 2380 W 78TH ST 2380 W. 18th Street HIALEAH FL 33016 _{City} Hialeah Zip Code 33016 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 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition ☐ Delete ☐ Change TITLE VILLARAN, JUAN A NAME NAME STREET ADDRESS STREET ADDRESS 15476 NW 77TH CT / STE - 320 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME

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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY+ST-7IP

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

313 MATERIQUIRED

☐ Delete

2-9-00

305-826-8846

ite

Daytime Phone #

☐ Change

☐ Addition

O IE LOOT (0.00)