2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M62379 Apr 12, 2000 8:00 am Secretary of State 1. Entity Name CHARM INTERNATIONAL, INC. 04-12-2000 90024 035 ***158.75 Principal Place of Business Mailing Address 1055 SE 9TH TERR 1055 SE 9TH TERR HIALEAH FL 33010-5804 HIALEAH FL 33010 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0013962 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name **GUTIERREZ, JESUS** Street Address (P.O. Box Number is Not Acceptable) 4241 S.W. 149TH COURT **MIAMI FL 33185** Zip Code City 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 DATE (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 Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE Delete TITLE WALTER FITZGERALD SANCHEZ, RAYMOND NAME NAME 4241 5 W. 149 CT. MIAMI, FL. 33185 STREET ADDRESS 1001 SE 11TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33010 Change WALTER FITZGERALD ☐ Addition Delete TITLE NAME **GUTIERREZ, ILEANA** NAME 4241 SW 149 CT STREET ADDRESS 4241 S.W. 149TH COURT STREET ADDRESS FL. 33185 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition Delete TITLE TITLE SANCHEZ, CARMEN NAME NAME 1001 S.E. 11TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33010 ☐ Change ☐ Addition Delete TITLE TITLE **GUTIERREZ. JESUS** NAME NAME STREET ADDRESS STREET ADDRESS 4241 SW 149TH CT CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33185** ☐ Change Addition ☐ Delete 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

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:

SIGNATURE AND TYPED OR PRINTED POME OF SIGNING OFFICER OR DIRECTOR SECRETARY

3/27/00 (305) 888-2118