2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED **DOCUMENT # M76609** May 02, 2000 8:00 am 1. Entity Name Secretary of State WINDBREAK (FLA) CORP. 05-02-2000 90065 001 ***150.00 Mailing Address Principal Place of Business 10462 NW 315T TR 10462 NW 31ST TR MIAMLEC 33172-1200 MIAMI FL 33172 3. Mailing Address 2. Principal Place of Business New 52 st. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State W/CREEK, 71. 65-0044547 Not Applicable Country \$8.75 Additional Zip Country USA 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PALACIOS, RICARDO Street Address (P.O. Box Number is Not Acceptable) 10462 NW 31ST TERR. MIAMI FL 33172 Zip Code statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named (NOTE: Registered Agent signature required when reinstating) DATE Signature: typed or printed name of registered agent and title if applicable 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change Addition TITLE ☐ Delete TITLE NAME ROSSEL, ALVARO NAME STREET ADDRESS STREET ADDRESS 10462 N.W. 31 TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 ☐ Change Addition Delete TITLE NAME MILOSLAVIC, LUCAS STREET ADDRESS STREET ADDRESS 10462 N.W. 31 TERRACE CITY-ST-ZIP CITY-ST-ZIF **MIAMI FL 33172** Addition TITLE TITLE - 🖃 Delete NAMÉ NAME PALACIOS, RICARDO STREET ADDRESS STREET ADDRESS 10462 N.W. 31 TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAM! FL 33172 ☐ Change Addition Delete TITLE TITLE NAME NAME MILOSLAVIC, LUKO STREET ADDRESS STREET ADDRESS 10462 N.W. 31 TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 ☐ Change ☐ Addition Delete TITLE TITLE VASQUEZ, ANGELICA NAME NAME STREET ADDRESS STREET ADDRESS 10462 NW 31ST TERR. CHTY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33172** ☐ Change Addition Delete TITLE TITLE NAME PENA, JULIO NAME STREET ADDRESS STREET ADDRESS 10462 N.W. 31ST TERR. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 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 receipts 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 with all other like empowered. changed, or on an attachmen an a

Date

Daytime Phone #