'FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

STREET ADDRESS

CITY-ST-ZIP

FILED PROFIT Feb 06 1998 8:00am LLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # M84712 ASESORIAS JURIDICAS INTERNACIONALES, INC. Principal Place of Business Mailing Address 1889 N.W. 7TH ST. 1888 N.W. 7TH ST. MIAMI FL 33125 MIAMI FL 33125 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/09/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0061012 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registere Agent 81 Name RODRIGUEZ, JAIME 1888 N.W. 7 ST. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33125** 83 84 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and tiln if applicable (NOTE Registered Agont's guature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition RODRIGUEZ, JAIME NAME 1.2 NAME 1888 N.W. 7TH ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - 7/P DELETE TITLE 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-SI-ZIP 3.4. CITY-ST-7(P DELETE TITLE 41]!!!! Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - \$1 - 7IP TITLE DELETE 40000242612 flange 61 TITLE Addition NAME 6.2 NAME -02/10/98--01016--007

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under each; that I am an officer or director of the corporation or the receiver or sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if quarters, once attachment with an address.

***150.00