2001 UNIFORM BUSINESS REPORT (UBR)

Sep 12, 2001 8:00 am Secretary of State DOCUMENT # N9900000816 1. Entity Name 09-12-2001 90021 022 ****61.25 HONDURAS-LEMPIRA-EBEN-EZER FOUNDATION, INC. Principal Place of Business Mailing Address 1790 N.E. 117 ROAD APT. 103 1790 N.E. 117 ROAD APT. 103 E9#76429 · NORTH MIAMI FL 33181 NORTH MIAMI FL 33181 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number NOT APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **GUEVARA, GLORIA** 159 E. FLAGLER STREET **MIAMI FL 33131** 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. 1 SIGNATURE Stonature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Trust Fund Contribution. Added to Fees Department of State After September 12, 2001, min. will be \$236.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete (5/01 ☐ Change ☐ Addition TITLE TITLE VARGAS, ADOLFO NAME NAME STREET ADDRESS 1790 NE 117 ROAD, APT 103 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33181 ☐ Delete ☐ Change ☐ Addition TITLE TITLE SIERRA, JORGE A NAME NAME STREET ADDRESS 1790 NE 117 ROAD, APT 103 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33181 Delete Change ☐ Addition TITLE TITLE GUEVARA, GLORIA NAME NAME STREET ADDRESS 874 SW 1ST STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33130 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME PINEDA, NERY NAME STREET ADDRESS 4209 EAST 9TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33013 TITLE □ Delete TITLE ☐ Change Addition NAME MEJIA, OSCAR 13707 SW 66TH STREET, C-109 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33183 TITI F Delete TITLE-☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

101/11/11 10 DUIADOIFO VARGAS 9/6/01 305-893-7863