2000 UNIFORM BUSINESS REPORT (UBR) 4/2 FILED DÖCUMENT # N99000007020 Jun 05, 2000 8:00 am Secretary of State FONDAZIONE REGIONALE CRISTOFO COLOMBO USA, INC. 04-25-2000 90072 022 ****61.25 Principal Place of Business Mailing Address 14 N.E. FIRST AVENUE 14 N.E. FIRST AVENUE SUITE 1105-1 SUITE 1105-1 MIAM) FL 33132 MIAMI FL 33132 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE XX Applied For City & State City & State 4. FEI Number Applied for Not Applicable Zip Country \$8.75 Additional Zlp Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent -6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) AMERICAN INFORMATION SERVICES, INC. ONE S.E. THIRD AVENUE, 28TH FLOOR 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be **FILE NOW:** Trust Fund Contribution. 2 (1) 12 Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ... 10. 11. TITLE ! Director/President ☐ Celete TITI E NAME . NAME Attilio M.Costabel 14 NE 1st Avenue Suite 1105-1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Miami FL 33132 Addition ☐ Change ☐ Delete TITLE Director NAME NAME Henry H.Raattama STREET ADDRESS STREET ADDRESS 1 SE 3rd Avenue-28 Floor CITY-ST-ZIP CITY-ST-ZIP Miami, FL 33131 Change : Addition Director ☐ Delete TITLE TITLE NAME Coman Leonard Jr. NAME 3050 W. Tharpe Street STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Tallahassee, FL_32303 Addition Change Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREFT ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP 🖂 🖸 Change ☐ Delete TITLE NAME NAME HETS 15 JED 31. Sattle at an agree. MATHER PROPERTY STREET ADDRESS 5 HERRY 2011 978 STREET ADDRESS रेन् भारता क 医化管 经代价 Y gwgolyskieth, 计元件 特 电扩展气态存储 CITY-ST-ZIP CITY-ST-ZIP 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR