2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P0000001826 1. Entity Name SILVER DOLLAR HOUSE, INC. 04-30-2001 90004 022 ***150.00

Mailing Address

Apr 30, 2001 8:00 am Secretary of State

1500 SW 126 PLACE 1500 SW 126 PLACE **MIAMI FL 33184** MIAMI FL 33184 3. Mailing Address 2. Principal Place of Business 104 14645SW 104ST 14645 SW Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For 65-0971596 1AM1 AMI Not Applicable Country HADE \$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 LUISA CARTAYA, LUISA 1500 SW 126 PLACE MIAMI FL 33184 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Delete TITLE TITLE

CARTAYA, EDDY. N CARTAYA, EDY N NAME NAME 14645 SW 104 ST STREET ADDRESS 1500 SW 126 PLACE STREET ADDRESS MIAMI, FL 33186 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33184 Change ☐ Addition D ☐ Delete TITLE TITLE CARTAMA, LUISA CARTAYA, LUISA NAME NAME 14649 SW 1045T 1500 SW 126 PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 11 Ami, FL 33186 **MIAMI FL 33184** TITLE Delete . TITLE MAURA RODRIGUEZ NAME NAME 14645 SW 104 ST STREET ADDRESS STREET ADDRESS MIAMI, FL 33186 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE HelisSA CARTAYA NAME NAME 14645 SW 1045T STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE DUS CARTAMA NAME NAME 045 SW 1645T STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE [X] Addition Delete TITLE BAIRIS CARTAYIT NAME NAME STREET ADDRESS 14645 SW 104ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u> Miami</u>

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:

Principal Place of Business

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FEI #65-0971596 /# P00000001826 #12 ADDITIONAL OFFICERS

241730

D RAMON A. HERNANDEZ 14645 SW 10444 ST MIANI, FL 33186 X ADDITION

RAMON RODRIGUEZ 14645 SW 10445T MIAMI, FL 33186 A ADDITION