2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 30, 2001 8:00 am Secretary of State DOCUMENT # P0000003503 SOFTWARE DEVELOPMENT AND SYSTEM ENGINEERING, INC 04-30-2001 90348 005 ***150.00 Principal Place of Business Mailing Address 17664 SW 139 COURT 17664 SW 139 COURT MIAMI FL 33177 **MIAMI FL 33177** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number Not Applicable -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 RAMIREZ, JAIME Street Address (P.O. Box Number is Not Acceptable) 17664 SW 139 COURT MIAMI FL 33177 Zip Code City FL 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 (NOTE: Registered Agent signature required when reinstating) 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 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Atter 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 12. 11. Addition Change TITLE ☐ Delete OSPINA, JOSE E NAME NAME STREET ADDRESS CARRERA 7 NUMERO 32-33 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SANTA FE DE BOGOTA COL. TITLE Delete TITLE Change Addition HURTADO, CRISTIAN O NAME NAME STREET ADDRESS CALLE 86C #103 D-22 INTERIOR 126 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SANTA FE DE BOGOTA COL. Change - - Addition TITLE 1 ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filling 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 given and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trystee employeed 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 a n address with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

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