2002 UNIFORM BUSINESS REPORT (UBR)

Mar 06, 2002 8:00 am Secretary of State P00000014294 DOCUMENT # 1. Entity Name 03-06-2002 90119 031 ***150.00 BRANDSBUY.COM, INC. Principal Place of Business Mailing Address 1845 NW 168TH AVE 1845 NW 168TH AVE PEMBROKE PINES FL 33028 PEMBROKE PINES FL 33028 3. Mailing Address AW 94 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0980042 7) 1 A M I Not Applicable 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 SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 Zip Code City 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, 2002 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. PD CARAballo, TITLE TITLE Delete SUAREZ, EVELIÓ D NAME NAME 4742 SW 8004 NORTHWEST 154TH STREET STREET ADDRESS STREET ADDRESS **MIAMI FL 33016** CITY-ST-ZIP CITY-ST-ZIP 🔀 Change ☐ Addition TITLE ☐ Delete TITLE SUAREZ, YEILANY NAME NAME 1845 NW)68 Ave 8004 NORTHWEST 154TH STREET STREET ADDRESS STREET ADDRESS Pembroke Pines. **MIAMI FL 33016** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE Soler, Yolanda 9449 NW-47th Ferrace NAME NAME STREET ADDRESS STREET ADDRESS miami FL CITY-ST-ZIP CITY-ST-ZIP TREASURE ☐ Change ☐ Delete Addition TITLE Andux, YiliAm NAME 742 SW ISTreet STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-7IP

SIGNATURE:

FILED

JR2Fn34 (9/01)