2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 17, 2002 8:00 am & Secretary of State DOCUMENT # P00000015439 1. Entity Name 05-17-2002 90026 035 ***150.00 VENETO HOUSE INTERNATIONAL, INC. Principal Place of Business Mailing Address 11428 SW 86TH LANE 11428 SW 86TH LANE **MIAMI FL 33173** MIAMI FL 33173 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 01-0601610 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUBIO, JORGE P Street Address (P.O. Box Number is Not Acceptable) 11428 SW 86TH LANE **MIAMI FL 33173** 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible = : FILE NOW!!! FEE IS \$150.00 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 oriteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete THTLE Change ☐ Addition CAVALLIN, JUAN E NAME NAME 11428 SW 86TH LANE STREET ADDRESS STREET ADDRESS CITY - ST-7IP **MIAMI FL 33173** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME RUBIO, JORGE P NAME STREET ADDRESS 11428 SW 86TH LANE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33173** CITY-ST-ZIP TITLE Delete :-TITLE _____.Change___ - ___.Addition_ NAME FERNANDEZ FEO. SOLVEIG NAME STREET ADDRESS 11428 SW 86TH LANE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33173** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME PEREZ. BERTA NAME STREET ADDRESS 11428 SW 86TH LANE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33173** CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

Date

Daytime Phone #

FILED