2004 UNIFORM BUSINESS REPORT (UBR) FILED Mar 14, 2001 8:00 am Secretary of State DOCUMENT # P00000021262 Soly Arena International Realty 03-14-2001 90521 002 \*\*\*158.75 Company Principal Place of Business Mailing Address 10621 N. Kendall Drive suite 206 Miami, FL 33176-1530 AG033250 2. Principal Place of Business 3. Mailing Address 12930 NW 6 Terrace Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State . 4. FEI Number 65-1012135 Applied For FL miami Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33182 U.S.A Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Elizabeth Almansa Street Address (P.O. Box Number is Not Acceptable) 2930 NWG Terrac miami 33182. 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. . Director, - President (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 -Tax filing requirement and elects to do so-After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE James L. Warmington Delete TITLE Change Addition | NAME NAME Elizabeth Almansa STREET ADDRESS 12930 NW 6 Terrace miami, FL 33182 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete Mercedes T. García TITLE Addition NAME Antonio Garcia 6310 sw 18 Terrace STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP miami, FL 33155 TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE:

Enastirector-President