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FILED

2001 UNIFORM BUSINESS REPORT (UBR)

May 15, 2001 8:00 am Secretary of State DOCUMENT # P0000021404 1. Entity Name 05-15-2001 90158 010 ***150.00 CASITA INTERNATIONAL INC. Principal Place of Business Mailing Address 1550 NE 123RD SUITE N503 1550 NE 123RD SUITE N503 NORTH MIAMI FL 33161 NORTH MIAMI FL 33161 10051591 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 099 1152 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CASIMIR, JEAN-CLAUDE Street Address (P.O. Box Number is Not Acceptable) 1550 NE 123RD SUITE N503 NORTH MIAMI FL 33161 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 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PRESIDENT ☐ Delete TITLE P Change CR2E034 (10/00) CASIMIR JEAN-CLAUDE CASIMIR, JEAN-CLAUDE NAME NAME NORTH MIAHI FL 3316 1550 NE 123RD SUITE N503 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORTH MIAMI FL 33161 CITY-ST-ZIP VICE-PRESIDENT TITLE ☐ Delete TITLE **▼** Change ☐ Addition LASIMIL SABRINA 1450 NE 123 RO SUITE N 503 CASIMIR, SABRINA NAME 1550 NE 123RD SUITE N503 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORTH MIAMI FL 33161 CITY-ST-ZIP NORTH MIAMI FL 33161. TITLE ☐ Delete TITLE SECRETARY /TREASURER Addition Change CASIMIR, JACQUELINE CASIMIR JACQUELINE 1500 NE 12320 SUITE NS03 NAME NAME STREET ADDRESS 1550 NE 123RD SUITE N503 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NORTH MIAMI FL 33161 NORTH MIAMI FL 33161. TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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. JEAN. CLAUDE CACIHIR APRIL 23, 2001 305 89/55/16 SIGNATURE: