2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2001 8:00 am DOCUMENT # P0000025541 Secretary of State 1. Entity Name OHWORLD, INC. 05-14-2001 90163 001 ****38.00 05-14-2001 90163 002 ****94.00 05-14-2001 90163 003 ****19.00 Principal Place of Business Mailing Address 1034 ALTON RD. 1034 ALTON RD. MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 2. Principal Place of Business 3. Mailing Address 348 SW Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For lia mi Not Applicable Zip Country *Country Zip \$8.75 Additional 5. Certificate of Status Desired 33129 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **GUERRA, LOURDES** Street Address (P.O. Box Number is Not Acceptable) 32 CALABRIA AVENUE LOWER UNIT-B CORAL GABLES FL 33134 Zip Code 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change TITLE Delete **GUERRA, LOURDES** NAME/S NAME 32 CALABRIA AVENUE LOWER UNIT-B STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL 33134 CITY-ST-ZIP OF business development - Change Delete NAME GALLARDO, MANUEL I NAME 800 West Ave #420 STREET ADDRESS 20 S.W. 108TH AVENUE #F-7 STREET ADDRESS ami Beach, Fe. 33139 CITY-ST-ZIP **MIAMI FL 33174** CITY-ST-ZIP Addition ☐ Change TITLE TITI F X Delete V.P. OF Visual Technology NAME GALLARDO, RAFAEL J NAME Isabel Hernandez STREET ADDRESS 20 S.W. 108TH AVENUE #F-7 STREET ADDRESS Miami Boach, FG. 33/40 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33174** Wof Investment & Public Relations ☐ Delete TITLE TITLE NAME NAME Sylvana, S. Levy STREET ADDRESS 1456 N. Treasure Dr. #8M STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Miami, FL. 33/4/ ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition 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 of 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.

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SIGNATURE: 🖺

upja SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR