2001 UNIFORM BUSINESS REPORT (UBR)

Mar 08, 2001 8:00 am Secretary of State DOCUMENT # POOOOOZ7337 1. Entity Name 03-08-2001 90062 046 ***150.00 EUROCHILE CORPORATION Principal Place of Business Mailing Address 7225 N.W. 25th Street 00031705 Suito 306 Mirmi, Florida 33122 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0995284 Not Applicable Country Zip \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LUIS C. ARAUZ 7225 N.W. ZSK Street Street Address (P.O. Box Number is Not Acceptable) Mirmi, Florida 33122 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 DATE 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 \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 Change Addition DIVPISIT Delete TITLE TITLE PID Pear & A. Elgueta, #306 Pedro A - Elgueta 17225 8W 25-15 Street, #306 NAME NAME STREET ADDRESS STREET ADDRESS Mrami, CL 33122 Mi mi, FL 33122 CITY - ST - ZIP CITY - ST - ZIP Change Addition TITLE TITLE ☐ Delete MARCOS ELGUETA TZZS NW ZS & Stroet | #306 NAME NAME STREET ADDRESS STREET ADDRESS MIAME, FL 33122 CITY - ST - ZIP CITY - ST - ZIP Addition Change TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP Addition Delete TITLE l Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP Change Addition Delete TITLE TITLE 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 regeiver 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 architagement with an address, with all other like empowered. Padro A. Elgueta, Dir

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #

STF FL32381F.1

SIGNATURE: