2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000029934

Entity Name: EXPORT T.T.I. OF AMERICA, INC.

FILED Apr 28, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13899 BISCAYNE BLVD. 13899 BISCAYNE BLVD.

#104 SUITE 104

MIAMI, FL 33181 NORTH MIAMI BEACH, FL 33181

Current Mailing Address: New Mailing Address:

25 S.E. 2ND AVENUE 13899 BISCAYNE BLVD.

#410 SUITE 104

MIAMI, FL 33131 NORTH MIAMI BEACH, FL 33181

FEI Number: 65-0994240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARVALHO, ALOISIO JR

13899 BISCAYNE BLVD.

STE 104

STE 104 SUITE 104

MIAMI, FL 33181 NORTH MIAMI BEACH, FL 33181

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: ALOISIO CARVALHO JR. 04/28/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 FONT, JUAN S
 Name:
 GARCIA, NESTOR GUSTAVO C

 Address:
 25 S.E. 2ND AVENUE #410
 Address:
 13899 BISCAYNE BLVD. SUITE 104

 Other St. Zime
 MAANUE II 234434
 NORTH MAANUE FL 234434

City-St-Zip: MIAMI, FL 33131 City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: D () Delete Title: D (X) Change () Addition Name: NETO, RUBENS G Name: KONEN, CARLOS G

Address: 25 S.E. 2ND AVENUE #410 Address: 13899 BISCAYNE BLVD. SUITE 104

City-St-Zip: MIAMI, FL 33131 City-St-Zip: NORTH MIAMI BEACH, FL 33181

Title: D (X) Delete Title: () Change () Addition

 Name:
 NIEMEYER, A. THOMAS R.
 Name:

 Address:
 25 S.E. 2ND AVENUE #410
 Address:

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS GUNTHER KONEN D 04/28/2003