2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 28, 2002 8:00 am Secretary of State P00000031382 DOCUMENT # 05-01-2002 91495 015 ***150.00 1. Entity Name LINERS CREATION CORPORATION Principal Place of Business Mailing Address 19940 NW 83RD AVENUE 19940 NW B3RD AVENUE MIAMI: FL 33015 MIAMI FL 33015 2. Principal Place of Business Jg Address 15800 NW 127 AVE Suite, Apt. #, etc Suite, Apt. #. etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1041780 ALEAH UIAM. Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 33012 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODRIGUEZ, JORGE L Street Address (P.O. Box Number is Not Acceptable) 19940 NW 83RD AVENUE MIAMI FL 33015 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 ___ 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. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Department of State Added to Fees (See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE CR2E034 (9/01) CODPIGUEZ ☐ Addition RODRIGUEZ, JORGE L NAME NAME STREET ADDRESS 19940 NW 83RD AVENUE STREET ADDRESS 20162 NW 157 PL CITY-ST-ZIP MIAMI FL 33015 CITY-ST-ZIP MIAMI FL. TITLE ☐ Delete TITLE Change ☐ Addition NAME RODRIGUEZ, RAMON A NAME 20162NW 157 R. STREET ADDRESS i 19940 NW 83RD AVENUE STREET ADDRESS CITY-ST-ZIF MIAMI FL 33015 CITY-ST-7IP TITLE ☐ Déletē TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TIT! F ☐ 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 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 specule 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.

FILED