FILED
Mar 27, 2003 8:00 am
Secretary of State
03-27-2003 90115 037 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000040267

1. Entity Name
EDITORES GRAFICOS U.S.A., INC.

Principal Place of Business	Mailing Address
361 LAKEVIEW DRIVE CORAL SPRINGS, FL 33071	361 LAKEVIEW DRIVE CORAL SPRINGS, FL 33071

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc. 400 NW 115TH. WAY	Suite, Apt. #, etc. 400 NW. 115TH. WAY
City & State CORAL SPRINGS FL	City & State CORAL SPRINGS FL
Zip 33071 / Country U.S.A	Zip 33071 / Country U.S.A

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1016680 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FRANKY, CARLOS 361 LAKEVIEW DRIVE CORAL SPRINGS, FL 33071	Name FRANKY CARLOS Street Address (P.O. Box Number is Not Acceptable) 400 NW 115TH WAY City CORAL SPRINGS **FL** Zip Code 33071

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE CARLOS FRANKY [signature] MARCH 24, 2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROZO, CARLOS A 361 LAKEVIEW DRIVE CORAL SPRINGS, FL 33071	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROZO, HECTOR A 361 LAKEVIEW DRIVE CORAL SPRINGS, FL 33071	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS ROZO [signature] March 24/03 954-7553568
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #