FILED

2001 UNIFORM BUSINESS REPORT (UBR)

May 16, 2001 8:00 am § Secretary of State DOCUMENT # P0000041484 1. Entity Name 05-16-2001 90097 026 ***158.75 ASESORAMOS, CORP. Principal Place of Business Mailing Address 9010 S.W. 137TH AVENUE 9010 S.W. 137TH AVENUE SUITE 113 SHITE 113 MIAMI FL 33186 MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1002177 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent _Ramirez Pavel PENA: GERMAN Street Address (P.O. Box Number is Not Acceptable) 9010 S.W. 137TH AVENUE SUITE 113 MIAMI FL 33186 Zip Code 33193 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 me of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE ature, typed or printed n 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 CR2E034 (10/00) TITLE Delete TITLE ☐ Addition Ramirez Tavia GARCIA, JORGE M NAME NAME 14931 sw 82 Lane Apt. 504 14931 S.W. 82ND LANE STREET ADDRESS STREET ADDRESS CITY-ST-7IP Miami #L 33193 CITY-ST-7IP MIAMI FL 33191 TITLE Delete TITLE Change Addition Ramirez Norman RAMIREZ. TANIA NAME NAME 14931 sw 82 Lane Apt. 504 STREET ADDRESS STREET ADDRESS 14931 S.W. 82ND LANE CITY-ST-ZIE CITY-ST-ZIP miami Ph 33193 MIAMI FL 33191 SD Shave holder TITLE Delete TITLE Change ☐ Addition Idiana Oppina .. RAMIREZ, PAVEL ----NAME . NAME _ _ 14951 sw 82 Lane Apt, 504 14931 S.W. 82ND LANE STREET ADDRESS STREET ADDRESS Miami + L 33193 CITY-ST-ZIP MIAMI FL 33191 CITY-ST-ZIP Shave holder TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME 6 ladys Perez NAME STREET ADDRESS STREET ADDRESS 14931 SW 82 Lane Apt. 504 CITY-ST-ZIP CITY-ST-ZIP Mami #L 33193 TITLE ☐ Delete Share holder TITLE Change Addition Claudía Patricía Garcia NAME NAME STREET ADDRESS STREET ADDRESS 14931 8W 82 Laur Apt. 504 CITY-ST-ZIP miami FL 33193 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

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 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 an attachment with an address, with all other like

CITY-ST-ZIP

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