2001 UNIFORM BUSINESS REPORT (UBR) Sep 06, 2001 8:00 am Secretary of State DOCUMENT #2000 000 74557 08-08-2001 90002 018 \*\*\*150.00 Mailing Address W. 107 AVCHE 400 SW. 107AVE#301 MIAMIFL 33174 MIAMI FL 33174 2. Principal Place of Business 16876 SW 5WAG Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE DE Stan Applied For Not Applicable \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JUIO CHAlmeta-NOCHAINE 16876 SW 5WAY 8. The above named entity submits this statement for the purpose of changing its reg nt, or both, in the State of Florida. 9. This corporation is eligible to satisfy its intangible FILE-NOW!!! FEE'19 \$150:00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filling regulrement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (11/00) TITLE Dalete . TITLE Change Addition TUIO AHAlmeta NAME NAME J. STREET ADDRESS STREET ADDRESS 16876 5W 5WM CITY-ST-ZIP CITY-ST-ZIP WESton Floelda 33326 ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delate TITLE ☐ 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-\$1-ZIP CITY-ST-ZIP TITLE Delete me Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 13. I hereby certify that the information supplied with this filling 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 suppliemental 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 empowered. -26-01-954-682562 SIGNATURE: SIGNATURE AND TYPED ON PRINTED NAME

**FILED** 



Division of corporation

Dear Sir:

First of all thank you for giving any attention to this letter. We would like to explain our situation --- We opened our office at the end of last year and rented and office in 400 S.W. 107 Av. # 301 Miami. After a few months we had a few inconveniences with the landlord and had to move out. He never took time on forwarding us our mail nor any other type of information.

When we opened the company we never got any instructions on having the responsibility to mail you any change of address. For this matter we never got the UBR form, were it states that there was a fee of \$150 before May the

first.

We had a conference given by the Small Business Administration were we learned everything concerning this matter and immediately got in touch with your office and the person that took care of our call guide us about writing this letter accompanied with the UBR form that she mailed to us and the check for the fees 150.

For this matter we ask you to please, exonerate any fine for this year and we assure you that now knowing the rules these types of incidents will never happen again.

Thank you for taking time and consideration in to our case.

Sincerely yours,

Julio Chalmeta

CONSAD Corp.