2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 27, 2001 8:00 am Secretary of State DOCUMENT # **P0000078471** R.G.B. HIGH TECH COMMUNICATIONS, INC. 04-27-2001 90299 017 ***163.75 Principal Place of Business Mailing Address 1360 N.W. 29TH STREET 1360 N.W. 29TH STREET MIAMI FL 33142 MIAMI FL 33142 645497 2. Principal Place of Business 3. Mailing Address 1384 NW 29Th St. 1384 NW Zath St. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For MIAMI-FL 33142 65-1033436 MIAMI - FL. Not Applicable \$8.75 Additional 5. Certificate of Status Desired MIAMI-DADE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BERNAL, RUBEN Street Address (P.O. Box Number is Not Acceptable) 1360 N.W. 29TH STREET MIAMI FL 33142 Zip Code 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 35. RNAC RUBEN Signature, typed or printed name of registered agent and title if applicable. 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. Z Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TIFLE Addition NAME BERNAL, RUBEN NAME STREET ADDRESS 1360 NW 29TH STREET STREET ADDRESS CITY - ST - ZIP CITY-ST-7IP MIAMI FL 33142 TYTLE ☐ Delete TITLE Change Addition BERNAL, RUBEN NAME NAME STREET ADDRESS 1360 NW 29TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33142** TITLE ☐ Delete TITLE Change Addition NAME NAME: STREET ADDRESS STREET ADDRESS CITY-SI-ZiP CITY - ST - ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete 1111.5 ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby cortify 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rusen Bernal 4/20/01 305-790-9338