FILED
May 22, 2002 8:00 am
Secretary of State
05-22-2002 90241 047 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000086763

1. Entity Name
CONCEPT OF BRONZE TRADING CORP

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1337 W. 49 PL	1337 W. 49 PL.
Suite, Apt. #, etc.: 506	Suite, Apt. #, etc.: 506
City & State: HIALEAH	City & State: HIALEAH
Zip: 33012 Country: USA	Zip: 33012 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1040215 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: QUIJANO, CONSTANZA

Street Address (P.O. Box Number is Not Acceptable): 1337 W. 49 PL #506

City: HIALEAH FL Zip Code: 33012

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: Constanza Quijano 05/02/02

Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent Signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	PTO
NAME	QUIJANO, CONSTANZA
STREET ADDRESS	1337 W 49 PL.
CITY-ST-ZIP	HIALEAH FL 33012
TITLE	SD
NAME	BORRAS, CESAR
STREET ADDRESS	1337 W. 49 PL
CITY-ST-ZIP	HIALEAH FL 33012
TITLE	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Constanza Quijano CONSTANZA QUIJANO 05/02/02 (305)819-2991

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #