2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER O

SIGNATURE:

FILED Apr 27, 2001 8:00 am Secretary of State DOCUMENT # P00000091303 BOUNCING WORLD RENTAL, INC. 04-27-2001 90375 044 ***150.00 Principal Place of Business Mailing Address 1338 SW 119TH AVE 1338 SW 119TH AVE PEMBROKE PINES FL 33025 PEMBROKE PINES FL 33025 961107 2. Principal Place of Business 3. Mailing Address Th WAY 119th WAY 775 775 SW Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 65-1046989 DAVIE DAVIE Not Applicable Country \$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 Jorge MARTINEZ RODRIGUEZ, GUILLERMO D Street Address (P.O. Box Number is Not Acceptable) 27542 SW 166 AVE MIAMI FL 33031 11924 775 WAY 8. The above named antity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 4/5/01 orge MARTINCE **SIGNATURE** Signature, by 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE X Delete THE Change MARTINEZ NAME RODRIGUEZ, GUILLERMO D NAME JOAGE 11914 WAY STREET ADDRESS 775 SW 27542 SW 166 AVE STREET ADDRESS CISY-ST-ZIP CITY-ST-ZIP 33325 **MIAMI FL 33031** DAvie Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TiT! F ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delate TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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