2001 UNIFORM BUSINESS REPORT (UBR) 200 UMENT # P00000101559 FILED Titi Representaciones 1989 Inc. 01 MAY 16 PM 2: 12 Principal Place of Business Mailing Address 7360 Coral Way suite: 21 SECRETARY OF STATE TALLAHASSEE. FLORIDA Hiami, FL 33155 Principal Place of Business 3. Malling Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1070071 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 Name Nestor Coronado Street Address (P.O. Box Number is Not Acceptable) 7360 Coral way STE: 21 Hiami, FL 33155 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: R. pistered Agent signature required when reinstating) EEE IS \$ (50.00) Foe will be \$550.00 to Department of Sta FILE NOW IN After MAY 1 2001 Make Chack Peyable 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Change Addition TITLE NAME Gloria C. Velasquez -Angel NAME 700<u>00428746</u>7--STREET ADDRESS STREET ADDRESS 7360 coral way ste: 21 -05/22/01--01078---011 CHTY-ST-ZIE CiTY-ST-ZIF <u> Hiami, FL 33155</u> ****150.00 ****150.00 Change Addition TITLE VID ☐ Delete ។។ MARLENY R. TAMAYO NAME 7360 CORAL WAY STE: 21 STREET ADDRESS STREET ADDRESS CUTY - S1 - 7IP CITY-ST-ZIP Hiami, FL 33155 Delete DILE TITLE Change Addition Nestor Coronado 7360 Coral Way STE: 21 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>Miami, FL 33155</u> TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-7P CITY-ST-ZIP HILE Delete TITLE ☐ Addition Change Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

13. Thereby 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 supplemental report is true and accurate and that n y signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report is 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 direct like empowered.

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER C & DIRECTOR

Daytime Pho

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TITI REPRESENTACIONES 1989 INC. DOC.# P00000107559

TO: DIVISION OF CORPORATION P.O. BOX 6327
TALLAHASSEE, FL 32314

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I FURTHER STATE THAT I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT.

CORDIALLY,

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