2002 UNIFORM BUSINESS REPORT (UBR) Aug 27, 2002 8:00 am } Secretary of State P01000002398 DOCUMENT # 1. Entity Name 08-27-2002 90120 016 ***550.00 MANTRA TRADING, INC. Principal Place of Business Mailing Address 7534 CITRUS HILL LANE 7534 CITRUS HILL LANE NAPLES FL 34109 NAPLES FL 34109 2. Principal Place of Business 3. Mailing Address 4125 CLEVELAND AUE 4125 CLEVELAND Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Čitv & State 4. FEI Number Applied For MYEM MYENS 65-1071911 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired \Box 46 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KAMLESH DAYA, KAMLESH (P.O. Box Number is Not Acceptable) 7534 CITRUS HILL LANE NAPLES FL 34109 Zip Code 8. The above named eptity 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 register 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filling requirement and elects to do so. "After May 1, 2002 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 PRTD ☐ Delete DAYA, KAMLESH NAME DAYA, KAMLESH STREET ADDRESS 7534 CITRUS HILL LANE 4125 Cleveland Ave #123 STREET ADDRESS NAPLES FL 34109 CITY-ST-ZIP CITY-ST-ZIP 18+ MYBUS, FL 37901 TITLE ☐ Delete TITLE ☐ Addition 4125 CLEVELAND AVE NAME NAME #123, F+ MYEM, FL-339=1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME 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

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 of fustee 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.

CITY-ST-ZIP

SIGNATURE:

CR2E034