## FOR PROFIT CORPORATION 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED May 21, 2002 8:00 am Secretary of State

2002 OHH OKH BOSHLESS KEI OKI (OBK)						secretary or state		
DOCUMENT # P01000035133 1. Entity Name : ;						05-21-2002 9114	9 023 ***158.75	
CREMINOX INTERNATIONAL CORP.								
<u> </u>						$\theta \theta \theta \iota \iota \circ$		
DO NOT WRITE IN THIS SPACE								
			JI AC	' <b>!</b>	_			
	lace of Business BAY DRIVE	3. Mailing Address 7207 BAY DRIVE						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE.			
	E #13	SUITE #13 City & State			4. FEI Number Applied For			
City & Stat MIAM	e I BEACH, FL	MIAMI BEACH, FL				55-1091645	Not Applicable	
Zip Country MIAMI-DADE		Zip Country 33141 MIAMI-DADE		5. Certificate of Status Desired				
	THIMIT DIDE	33.1.	11111	III DADE	7. Na	ame and Address of Current Registere	,	
Name GARCIA, ROB						ገድዋይሞር -	a <p< td=""></p<>	
DO NOT WRITE GARCIA, Street Address (I						P.O. Box Number is Not Acceptable)		
IN THIS SPACE				7207 BAY DRIVE #13				
City					Zip Code			
8. The above	named entity to by statement for	the purpose of changing	q its register	MIAMI I  ed office or registe	BEA( ered ag	CH gent, or both, in the State of Florida.	<del>-</del>	
04/30/2002								
SIGNATURE	Signature, under a printed name of registered agent a	od tida if ambigable	(NOTI-: Registers	ed Agent signature requir	ed when re			
				ee is \$150.00	<del></del>			
9. This corporation is eligible to satisfy its intangible  After May 1			May 1, Fee nded UBR	is \$550.00 is \$61.25	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ☐ Added to Fees			
11.	OFFICERS AND D		, , , , , ,					
TITLE	UPCMOD DITAC ACDEMMA			E				
NAME. STREET ADDRESS				EET ADDRESS	ADDRESS			
CITY-ST-ZIP				'-ST-ZIP				
TITLE	VP		TITL	Ē.		•		
NAME	AGUSTIN JOSE CAR.	AZA	NAM					
STREET ADDRESS	1/20/ DAI DRIVE #13			EET ADDRESS '-ST-ZIP				
CITY-ST-ZIP	MIAMI BEACH, FL	TITL						
TITLE NAME.	DECTION THAN ACRES		IE		<u>.</u>			
STREET ADDRESS	HECTOR JUAN AGRENTA 7207 BAY DRIVE #13			STRIET ADDRESS CHY-SI-74P  DO NOT WRITE				
CITY-\$T-ZIP	MIAMI BEACH, FL		CITY	Y-ST-ZIP DO NOT WATE				
THE	T		TITL NAM	<b>I</b>		IN THIS SPA	CE	
NAME STREET ADDRESS	ACHOMENI CADAGA			EET ADDRESS				
CITY-ST-ZIP-	7207 BAY DRIVE #13			-ST-ZIP				
TITLE	MIAMI BEACH, FL 3	3141	TITL	E				
NAME			NAM	16				
STREET ADDRESS	**, * *			EET ADDRESS				
CITY-ST-ZIP				'-S1-ZIP				
TITLE			TITU. NAM	1				
NAME STREET ADDRESS				EET ADORESS				
CITY-ST-ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 3.		'-ST-ZIP			<u> </u>	
13. I hereby	certify that the information supplied with	this filing does not qualit	fy for the exe	emption stated in S	Section	119.07(3)(i). Florida Statutes. I further of legal effect as if made under path, that	ertify that the information Lam an officer or director	

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 true exemption of the receiver, or true exemption of the corporation or the receiver, or true exemption of the receiver or true exemption of the corporation or the receiver, or true exemption of the receiver of true exemption of the corporation or the receiver, or true exemption of the corporation or the receiver, or true exemption of the corporation or the receiver, or true exemption of the corporation or the receiver or true exemption of the corporation or the receiver, or true exemption of the corporation or the receiver or true exemption of the corporation or the receiver or true exemption of the corporation or the receiver or true exemption of the corporation or the receiver or true exemption of the corporation or the receiver or true exemption of the corporation or the receiver or true exemption of the corporation or the receiver or true exemption of the corporation or the receiver or true exemption of the corporation or the receiver or true exemption or the receive

SIGNATURE

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/2002 (305) 865-0925

Daytime Phone ≠