FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

Aug 27, 2003 8:00 am Secretary of State P01000058742 DOCUMENT # 08-27-2003 90075 014 ***158.75 1. Entity Name SORTILEGE INTERNATIONAL CONSULTING GROUP, CORP Principal Place of Business Mailing Address 14346 S.W. 90TH STREET 14346 S.W. 90TH STREET MIAMI FL 33186 MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 65-1114236 Not Applicable Country Zip \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DE LA OSSA, ROSARIO Street Address (P.O. Box Number is Not Acceptable) 14346 S.W. 90TH STREET **MIAMI FL 33186** 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, PTSD TITLE TITLE ☐ Addition ☐ Delete DE LA OSA, ROSARIO NAME NAME 14346 S.W. 90TH STREET STREET ADDRESS STREET ADDRESS MIAMI FL 33186 CITY-ST-7IP 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 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 Сhалое ☐ Addition NAME 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

12. 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 sypplemental export is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the regeliver or trusteelem towered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on so attachment with an address with all other like empowered.

SIGNATURE:

MEDUIRED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Attachment \$50141187 #P01000058742

Rosario De La Ossa Sortilege International Consulting Group Corp. 14346 SW 90 Street Miami, Florida 33186

August 18, 2003

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Reference: FEI# 651114236/Sortilege International Consulting Group Corp.

Gentlemen:

Enclosed please find signed Uniform Business Report for the above referred corporation. Included with the report I am hereby enclosing a check for \$150.00 constituting the renewal fee.

Please note that prior to this renewal notification I have received no other communication from your organization. Therefore, I am hereby requesting a waiver of the penalty fee in relation to the renewal of the corporation.

Thank you for your attention to this matter. Until I hear from you next I remain,

Sincerely.

Rosario De La Ossa

Rresident