2002 Uniform Business Report (UBR)

SIGNATURE:

Mar 25, 2002 8:00 am P01000059413 Secretary of State DOCUMENT # 1. Entity Name MURANO GRANDE TWO, INC. 03-25-2002 90139 044 ***158 Principal Place of Business Mailing Address 2828 CORAL WAY 2828 CORAL WAY PENTHOUSE SUITE PENTHOUSE SUITE MIAMI FL 33145 MIAMI FL 33145 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number 65-1114284 Applied For City & State City & State Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HERNANDEZ, ANGEL A Street Address (P.O. Box Number is Not Acceptable) 2828 CORAL WAY PENTHOUSE SUITE **MIAMI FL 33145** Zip Code City 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: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 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. 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (9/01) TITLE ☐ Delete TITLE Perez, Jorga M. 2828 Coral Wax PH PEREZ, JORGE M NAME NAME 2828 CORAL WAY PENTHOUSE SUITE STREET ADDRESS STREET ADDRESS Miami, F1 33/45 **MIAMI FL 33145** CITY-ST-ZIP CITY-ST-ZIP Change Addition Addition TITLE ☐ Delete Rocha Koberto NAME NAME STREET ADDRESS 2828 Lural Way Pi STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **⊠**Addition TITLE Change ☐ Delete TITLE Henrowdez-Rubal NAME NAME 2828 Coval Way PH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Miami, FT **Addition** ☐ Change TITLE ☐ Delete TITLE Allew, Matthew NAME NAME STREET ADDRESS 2828 Com way PH STREET ADDRESS CITY-ST-ZIP €.CITY-ST-ZIP Miami, Fl. 33145 Addition Change TITLE ☐ Delete TITLE Browson, Toyce 2828 Coral Way PH NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Miami, F1 33145 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME 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 changed, or on an attachment with an address, with all other like empowered.

BANGEL HERNANDEZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR OF PRESIDENT

FILED

Daytime Phone #