FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90193 012 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000072893

1. Entity Name
ELEICY TRANS, INC.

90028989

Principal Place of Business	Mailing Address
4220 S.W. 21ST STREET FT LAUDERDALE, FL 33317	4220 S.W. 21ST STREET FT LAUDERDALE, FL 33317

2. Principal Place of Business		3. Mailing Address	
4970 SW 52 ST		1227 FAIRLAKE TRACE	
Suite, Apt. #, etc. 304		Suite, Apt. #, etc. 708	
City & State DAVIE, FL		City & State WESTON, FL	
Zip 33314	Country U.S.A.	Zip 33326	Country U.S.A.

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1145117 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NAVIA, IRAN
4220 S.W. 21ST STREET
FT LAUDERDALE, FL 33317 } DeleTe

7. Name and Address of New Registered Agent

Name CESAR TIBERIO RIVERA
Street Address (P.O. Box Number Is Not Acceptable) 1227 FAIRLAKE TRACE
City WESTON FL Zip Code 33326

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] 2/12/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee Will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS NAVIA, IRAN 4220 S.W. 21ST STREET FT LAUDERDALE, FL 33317	☒ Delete	TITLE PD NAME STREET ADDRESS CITY-ST-ZIP	CESAR TORIBIO RIVERA ☐ Change ☒ Addition 1227 FAIRLAKE TRACE # 708 WESTON FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	BETSABE NINO ☐ Change ☒ Addition 1227 FAIRLAKE TRACE # 708 WESTON FL 33326
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 2/12/03 (954)349-3650
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #