2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

ÉlÍFD DOCUMENT # P01000074287 1. Entity Name WRN INTERNATIONAL INC. 03 AUG 13 AHII: 29 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 3610 YACHT CLUB DR. #1115 3610 YACHT CLUB DR. #1115 AVENTURA, FL 33180 AVENTURA, FL 33180 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-1138590 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WINITZ, SOPHIE 21382 MARINA COVE CIRCLE 12D Street Address (P.O. Box Number is Not Acceptable) AVENTURA, FL 33180 Zip Code FL 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 Fiorida. I am familiar with, and accept the obtigations of registered agent. SIGNATURE -Signature, typed or primed name of registered agent and life if applicable. (NOTE Registered Agentsignature required when relessating) DATE THE NOW! I PARTS \$160.00 ARE MB. 1 2003 Fee Will be \$880.00 Amended UEF 15 \$61.25 Mike Check Payable OF Fords Department of State 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE ☐ Change Addition ☐ Delete NAMÉ WINITZ, SOPHIE NAME 800022480968 08/21/03--01052~-010 ***900.00 21382 MARINE COVE CIRCLE 12D STREET ADDRESS STREET ADDRESS 3R2E034 AVENTURA, FL 33180 CITY-ST-ZIP CITY-ST-2P Change Addition TITLE ☐ Delete TILE NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP CITY-ST-ZP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NUME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAJÆ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE ☐ Delete TITLE . Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2P 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)(1), 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 addiress, with all other prevented. SIGNATURE:

ATURE AND TYPED OR PRINTED WAS FOR SIGNING OFFICER OR DIRECTOR

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WRN INTERNATIONAL INC.

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR 2003 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY.

SOPHIE WINITZ

PRESIDENT