FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 19, 2002 8:00 am Secretary of State P01000100965 DOCUMENT # 1. Entity Name EIC COMPUTERS, INC. 05-19-2002 90170 027 ***150.00 Principal Place of Business Mailing Address 5741 HOLLYWOOD BLVD 5741 HOLLYWOOD BLVD HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address 5741 H Hollywood Hollywood Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Hallywoo 4. FEI Number Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired B. Ruward 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Mol Sign OuissainT SCHOROI, RENE Street Address (P.O. Box Number is Not Acceptable) 5741 HOLŁÝWOOD BLVD HOLLYWOOD FL 33021 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 (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State **11.** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LOUIS SANT, MOISE NAME STREET ADDRESS 5741 HOLLYWOOD BLVD Holly Wood STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33021 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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 TIT) F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information indicated on this report or suppler Ing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if vith This fill ort is true a of the corporation or the rece changed, or on an attachmen

SIGNATURE: