2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 19, 2003 8:00 am Secretary of State

DOCUMENT # P01000110697 1. Entity Name TERALEX INTERNATIONAL, INC.							05-19-2003 90231 015 ***150.00			
Principal Place of Business 201 ALHAMBRA CIRCLE. SUITE 502 CORAL GABLES FL 33134 Mailing Address 201 ALHAMBRA CIRCLE. SUI CORAL GABLES FL 33134 CORAL GABLES FL 33134					JITE 502					
Principal Place of Business Address Mailing Address							3 INDIADOL FILODANI 11317 DOLLA DOLLA DE	181 11401 11911 90110 9111	9 90111 40 D1 109!	
Suite, Apt. #, etc. Suite, Apt. #, etc.					·		☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State				FEI Number	1864	Vot Applicable	
Zip		Country	Zip	Ca	Country			Fee Requir		
6: Name and Address of Current Registered Agent					Name					
ARVESU, MANUEL M ESQ. 201 ALHAMBRA CIRCLE. SUITE 502 Street Address (P.O. Box Number is Not Acceptable)										
201 ALHA	MBRA CIRC	LE, SUITE 502			Street Ad	idress (P.O.	Box Number is Not Acceptable)			
CORAL GABLES FL 33134										
					City			FL Zip Co	de	
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.										
1	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									
			nt and title if applicable.	(NOTE: Regis	Kered Agent signatu	re required when	CHECK HERE IF MAKING CHANGES 4. FEI Number Applied Fox Not Addition Fee Required 7. Name and Address of New Registered Agent Zip Code gistered agent, or both, in the State of Fiorida. I am familiar with, and accept 9. Election Campaign Financing S5.00 May Be Addition Addition Addition Addition 10. Change Addition Addition 11. Change Addition Addition 12. Change Addition Addition 13. Change Addition Addition 14. Change Addition Addition 15. Change Addition Addition 16. Change Addition 17. Name and Address of New Registered Agent Addition 18. Election Campaign Financing S5.00 May Be Addition 19. Change Addition 19. Change Addition 10. Change Addition 11. Change Addition 12. Change Addition 13. Change Addition 14. Change Addition 15. Certificate of Statutes Author certify that the information 16. Change Addition 17. Name and Address of New Registered Agent 18. Election 119 (17/34/i) Elocide Statutes Author certify that the information 19. Change Addition 19. Change Addition			
Aftei	r May 1, 200	FEE IS \$150.00 3 Fee will be \$550.00 Florida Department (
10.		OFFICERS AND			11.	A	DDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	RS IN 11	
	PD	AL POPO	□ D4	elete T	TITLE			Change	☐ Addition S	
STREET ADDRESS		ALFRED IBRA CIRCLE, SUITE BLES FL 33134	502	s	NAME STREET ADDRESS CITY-ST-ZIP				67,768	
TITLE	VPD			~	ITLE			☐ Change	Addition 2	
NAME Street address	EET ADDRESS 201 ALHAMBRA CIRCLE, SUITE 502				NAME STREET ADDRESS		•			
CITY-ST-ZIP	CORAL GA	AL GABLES FL 33134 CITY-ST-ZIP								
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= Street Adoress : City-St-Zip		 			STREET ADDRESS CITY-ST-ZIP	-				
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CITY-ST-ZIP					ITY-ST-ZP					
TITLE NAME	,		□ De		ITLE AME		,	∐ Change	L.J Addition	
STREET ADDRESS CITY-ST-ZIP				s s	TREET ADDRESS		· •			
TITLE					III.É	-	i	☐ Channe	[] Addition	
NAME			25.		AME					
STREET ADDRESS CITY-ST-ZIP					TREET ADDRESS				{	
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 adversate 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 effect a first report as fequired 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 ampowered.										