FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 28, 2002 8:00 am Secretary of State **DOCUMENT #** P01000111120 1. Entity Name EGC INTERNATIONAL CORP. 05-28-2002 91636 044 ***150.00 Principal Place of Business Mailing Address 3650 HACIENDA BLVD., STE, H 3650 HACIENDA BLVD., STE, H FT. LAUDERDALE FL 33134 FT. LAUDERDALE FL 33134 2. Principal Place of Business 3. Mailing Address 3260 NOT 2350 3260 N.U. Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Suite E-1100 Suite City & State Pompano BEACH TL. City & State Fom PAMO 4. FEI Number Applied For 65-1159002 Not Applicable Zip Country \$8.75 Additional 33069 5. Certificate of Status Desired BROWALD 33069 BROWALD Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ATRIUM REGISTERED AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 1500 SAN REMO AVE., STE. 125 CORAL GABLES FL 33146 City Zip Code 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) 9._This corporation is eligible to satisfy its Intangible — FILE NOW!!!-FEE IS \$150.00 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. (See criteria on back) Added to Fees Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition SOSA, ARNALDO G NAME NAME 3650 HACIENDA BLVD., STE. H STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33134 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SILVA, JUAN DA NAME NAME 3650 HACIENDA BLVD., STE. H STREET ADDRESS STREET ADDRESS CITY-ST-7IP FT. LAUDERDALE FL 33134 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition GONZALEZ, SIMON NAME 3650 HACIENDA BLVD., STE. H STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33134 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS

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 thestee 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR