2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State
04-23-2003 90176 035 ***150.00

DOCUMENT # P02000029316

1. Entity Name
MASE - MACHINERY & SPECIAL EQUIPMENT, CORP.

11009865

Principal Place of Business	Mailing Address
9458 SW 13TH STREET #68 MIAMI, FL 33172	9458 SW 13TH STREET #68 MIAMI, FL 33172

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
22050 SW 127 Ave		PO Box 700075	
Suite, Apt #, etc.		Suite, Apt #, etc.	
City & State: Miami FL		City & State: Miami FL	
Zip: 33170	Country: USA	Zip: 33170	Country: USA

4. FEI Number: 01-0632167 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GALINDO, MARIA PAOLA
8250 SW 149 COURT
205
MIAMI, FL 33193

7. Name and Address of New Registered Agent

Name: Maria Paola Galindo
Street Address (P.O. Box Number Is Not Acceptable): 22050 SW 127 Ave
City: Miami FL Zip Code: 33170

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: Maria Paola Galindo - President [signature] DATE: 16 Apr 03

Signature, typed or printed name of registered agent and title if applicable
(NOTE: Registered Agent signature required when reinstating)

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	P GALINDO, MARIA PAOLA 8250 SW 149 COURT # 205 MIAMI, FL 33193	☐ Delete	P Galindo, Maria Paola 22050 SW 127 Ave Miami FL 33170	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ZULUAGA, OSCAR 6039 COLLINS AVENUE # 301 MIAMI, FL 33173	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RESTREPO, JORGE 6039 COLLINS AVENUE # 301 MIAMI, FL 33173	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MOLINA, AICARDO 6039 COLLINS AVENUE # 301 MIAMI, FL 33173	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOLINA, FREDDY 6039 COLLINS AVENUE # 301 MIAMI, FL 33173	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ARAUJO, RICAURTE 6039 COLLINS AVENUE # 301 MIAMI, FL 33173	☒ Delete		☐ Change ☐ Addition

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: Maria Paola Galindo [signature] 16 Apr 03 305-2584450

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)