FROM I MOTORS TRADING (THU)MAY 1 2003 5/6/2

FILED
Jun 19, 2003 8:00 am
Secretary of State
05-06-2003 90046 017 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000035288 (L)

1. Entity Name
SOCE INTERNATIONAL CORP.

Principal Place of Business
901 PONCE DE LEON BLVD SUITE 600
CORAL GABLES FL 33134

Mailing Address
901 PONCE DE LEON BLVD SUITE 600
CORAL GABLES FL 33134

[redacted]

2. Principal Place of Business: 6402 SW 93 Place
Suite, Apt. #, etc.
City & State: MIAMI, FL
Zip: 33173-2365 Country

3. Mailing Address: 6402 SW 93 Place
Suite, Apt. #, etc.
City & State
Zip: 33173-2365 Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 75-3044857 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
~~ALBORNOZ, WILLIAM H ESQ~~
~~901 PONCE DE LEON BLVD SUITE 603~~
~~CORAL GABLES FL 33134~~

7. Name and Address of New Registered Agent
Name: LILIAM FERNANDEZ CPA
Street Address (P.O. Box Number is Not Acceptable): 1440 JFK CAUSEWAY
Suite 301
City: NBV FL Zip Code: 33141

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: [signature] CPA 04/30/03
Registered Agent signature / Date

[redacted]

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	SOEIRO, CECILIA	
STREET ADDRESS	901 PONCE DE LEON BLVD SUITE 600	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☒ Change ☐ Addition
NAME	SOEIRO, CECILIA	
STREET ADDRESS	6402 SW 93 Place	
CITY-ST-ZIP	MIAMI, FL 33173-2365	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: SIGNATURE ON FILE President 4/30/03
Signature and typed or printed name of signing officer or director / Date / Daytime Phone #

Attachment
5504900
P02000035288

Employer Identification Number (EIN) OMB No. 1545-0257

75-3044857 171712 4 2

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SOCE INTERNATIONAL CORPORATION
CECILIA HELENA SOEIRO
6402 SW 93RD PLACE
MIAMI FL 33173-2365

INTERNAL REVENUE SERVICE CENTER
PHILADELPHIA, PA 19255

Send FTD Address Change and correspondence to the IRS address above.

Do not write beyond this line