FILED 2003 UNIFORM BUSINESS REPORT (UBB Jun 13, 2003 8:00 am **⊉NT# P02000035317** Secretary of State 1. Entity Name 06-13-2003 90057 036 ***150.00 RIBAS, INC. Mailing Address Principal Place of Business 4892 N DIXIE HWY 4892 N DIXIE HWY 90139457 **OAKLAND PARK, FL 33334** OAKLAND PARK, FL 33334 3. Mailing Address 2. Principal Place of Business Suite. Apt. #. etc. DO NOT WRITE IN THIS SPACE Suite Apt.#, etc, Applied For City & Stale 4. FEI Number City & Stale Not Applicable 74-3034976 \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TAX HOUSE CORPORATION TAX HOUSE CORPORATION Street Address (P 0. Box Number is Not Acceptable) **1261 E SAMPLE ROAD** 3929 N FEDERAL HWY POMPANO BEACH FL 33064 City Zip Code FL 33064 **POMPANO BEACH** 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. 06/06/03 SIGNATURE (NOTE:Registere Agent signature required when reinstating) of registered agent and title if applicable. Signature, typed or print FILE NOW! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. Addition Change ☐ Delete TITLE TITLE NAME HOERNIGK, ROBERT STREET ADDRESS STREET ADDRESS 2807 NE 28TH STREET CITY- ST- ZIF CITY-ST-ZIP FT LAUDERDALE, FL 33306 Addition Delete TITLE VTD TITLE NAME RIBAS, ANTONIO O NAME STREET ADDRESS 4892 N DIXIE HWY STREET ADDRESS CITY-ST-ZIP OAKLAND PARK, FL 33334 Change Addition Delete TITLE TITLE HAME STREET ADDRESS STREET ADDRESS CITY- ST- ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY, ST. ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIF ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE 13. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(1), 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 ampowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 11 or Block 12 N changed or on an attachment with an address, with all other like empowered

06/06/03

Date

Daytime Phone #

ANTONIO O RIBAS - PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Machinent 90139457

FLORIDA DEPARTMENT OF STATE Division of Corporation 2002 Uniform Business Report (UBR) 409 East Gaines Street Tallahassee, FL 32399

Re: Fixing of Uniform Business Report 2003 P02000035317 RIBAS INC.

To Whom It May Concern:

This letter is to inform you that we have never received a Uniform Business Report form by the mail.

We would like to request you that you forgive all extra fees and penalties other than the primary of \$150.00 and accept the filling of our attached UBR, which has been prepared by our accountant.

Any questions or concern, feel free to contact our accountant at (954) 725-4600 and speak to Mr. Breno Gomes.

Sincerely,

Antonio Ribas - Vice-President

RIBAS, INC. 4892 N Dixie HWY Oakland Park, FL 33334 PHONE (954) 776-5155