5/5

FILED
Jun 27, 2003 8:00 am
Secretary of State
05-05-2003 90205 017 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000048139

1. Entity Name
RELIGHT VENTURES GROUP CORP.

55049949

Principal Place of Business	Mailing Address
329 NAVARRE AVENUE SUITE 302 CORAL GABLES, FL 33134	329 NAVARRE AVENUE SUITE 302 CORAL GABLES, FL 33134

[redacted]

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
19701 E. Country Club Dr.	19701 E. Country Club Dr.
Suite, Apt. #, etc. # S-306	Suite, Apt. #, etc. S-306
City & State Aventura, FL	City & State Aventura, FL
Zip 33180 — County	Zip 33180 — County

4. FEI Number
04 3654957
☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SPIEGEL & UTRERA, P.A. 1960 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145	Name Street Address (P.O. Box Number is Not Acceptable) City — FL — 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 3/28/03
Signature of, or on behalf of, New Registered Agent, if applicable. (CURRENT Registered Agent's signature required when changing) Date

[redacted]

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
Title Name Street Address City-St-Zip	PD EVANS, JOSHUA 329 NAVARRE AVENUE SUITE 302 CORAL GABLES, FL 33134 ☐ Delete	Title Name Street Address City-St-Zip	☐ Change ☐ Addition
Title Name Street Address City-St-Zip	VD BOADIL, RAUL 329 NAVARRE AVENUE SUITE 302 CORAL GABLES, FL 33134 ☐ Delete	Title Name Street Address City-St-Zip	☐ Change ☐ Addition
Title Name Street Address City-St-Zip	SD ESTEFANO, RODOLFO 329 NAVARRE AVENUE SUITE 302 CORAL GABLES, FL 33134 ☐ Delete	Title Name Street Address City-St-Zip	☐ Change ☐ Addition
Title Name Street Address City-St-Zip	TD BELLO, LUIS 329 NAVARRE AVENUE SUITE 302 CORAL GABLES, FL 33134 ☐ Delete	Title Name Street Address City-St-Zip	☐ Change ☐ Addition
Title Name Street Address City-St-Zip	☐ Delete	Title Name Street Address City-St-Zip	☐ Change ☐ Addition
Title Name Street Address City-St-Zip	☐ Delete	Title Name Street Address City-St-Zip	☐ Change ☐ Addition

(Attach Additional Pages if Necessary)

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: _____ 3/28/03 305-301-9398
Signature and Typed or Printed Name of Individual Date Daytime Phone #