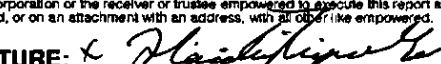


FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 91013 021 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000064849			
1. Entity Name COMERCIALIZADORA MMT CORP.			
Principal Place of Business 2250 S.W. 3RD AVENUE SUITE 201 MIAMI, FL 33129		Mailing Address 2250 S.W. 3RD AVENUE SUITE 201 MIAMI, FL 33129	
2. Principal Place of Business 13180 N. Cleveland Suite, Apt. #, etc. Suite 111 City & State N. Ft. MYERS FL Zip 33903 Country USA		3. Mailing Address 13180 N. Cleveland Suite, Apt. #, etc. Suite 111 City & State N. Ft. MYERS FL Zip 33903 Country USA	
4. EFL Number 55-0786413		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		☒ CHECK HERE IF MAKING CHANGES	
6. Name and Address of Current Registered Agent I.P. PROFESSIONAL, INC. 2250 S.W. 3RD AVENUE SUITE 201 MIAMI, FL 33129		7. Name and Address of New Registered Agent 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:  DATE: 03/17/2003 (NOTE: Registered Agent's signature required when reappointing)			
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP P TINJACA, HAIDIVY 2250 S.W. 3RD AVENUE, SUITE 201 MIAMI, FL 33129 Delete ☒		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME STREET ADDRESS CITY-ST-ZIP P Tinjaca, Haidivy 13180 N. Cleveland Suite 111 N. Ft. Myers FLORIDA 33903 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:  DATE: 03/17/2003		2392464379	