2003 FOR PROFIT CORPORATION

SIGNATURE:

Jan 29, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR) Secretary of State** P02000066645 DOCUMENT # 1. Entity Name 01-29-2003 90143 002 ***150.00 CENTURY TRANSFER, CORP. Principal Place of Business Mailing Address **JUUTAJJU** 400 LA VILLA DR. 400 LA VILLA DR. MIAMI SPRINGS FL 33166 MIAMI SPRINGS FL 33166 3. Mailing Address 6800 2. Principal Place of Business 40# S7 ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 02-062 433 City & State Applied For Not Applicable \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VICENCIO, RAMIRO A 400 LA VILLA DR. MIAMI SPRINGS FL 33166 mits 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 8. The above nam the obligation SIGNATUR ame of registered agent and title if applicable PILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PSD** TITLE ☐ Addition TITLE ☐ Delete NAME VICENCIO, RAMIRO A NAME STREET ADDRESS 400 LA VILLA DR. STREET ADDRESS MIAMI SPRINGS FL 33166 CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied wit indicated on this report or supplemental report of the corporation or the receiver or trustee error. oes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ocute 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

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED