FILED

2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

May 05, 2003 8:00 am Secretary of State P02000105404 DOCUMENT # 05-05-2003 90181 044 ***150.00 1. Entity Name CERAMIC IMPORT EXPORT, INC. Principal Place of Business Mailing Address 1805 SANS SOUCI BLVD. 1805 SANS SOUCI BLVD. APT. 403 APT. 403 MIAMI FL 33181 **MIAMI FL 33181** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 32~0039524 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FARROW, XIMENA Street Address (P.O. Box Number is Not Acceptable) 1805 SANS SOUCI BLVD. **APT. 403 MIAMI FL 33181** City Zip Code 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 above named the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. T, E ☐ Delete TITLE Addition NAME FARROW, XIMENA NAME STREET ADDRESS 1805 SANS SOUCI BLVD APT 403 STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP **MIAMI FL 33181** ☐ Change ☐ Addition ☐ Delete TITLE TITLE VPD. NAME NAME MARIN, CESAR STREET ADDRESS STREET ADDRESS 1805 SANS SOUCH BLVD APT 403 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33181 Delete SD Addition TITLE TITLE Change SD CECILIA MARIN NAME NAME FARROW, GORDON STREET ADDRESS STREET ADDRESS 1805 SANS SOUCH BLVD APT 403 1805 SANS SOUCH BLVD APT 403 CITY-ST-ZIP CITY-ST-ZIP, _ MIAMI-FL 33181 HIAMI FL TD Delete Change TITLE TITLE TD FARROW GORDON NAME FARROW, XIMENA NAME 1805 SANS SOUCH BLUD APT 403 STREET ADDRESS STREET ADDRESS 1805 SANS SOUCH BLVD APT 403 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33181 MIAMI FL 33181 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITI F TIT! F Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 of 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/ampowered.

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SIGNATURE:

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