FOR PROFIT CORPORATION

May 02, 2006 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 7050000 99176 05-02-2006 90190 027 ***150.00 ENIGSIO SAAVEBRA MASONE DO NOT WRITE IN THIS SPACE 40079348 Principal Place of Business 3. Mailing Address 6012 WESTFALLS Suite: Apt. #, etc DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Αρμιουίτο City & Country **\$8.75** Adequated Fee Required 7. Name and Address of Current Registered Agent PANDA EMIGAIO DO NOT WRITE IN THIS SPACE 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, the obligations of registered agent SIGNATURE Signature, fyibed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing \$5,00 May Be Trust Fund Contribution. Adduct to Fees Make Check Payable to Florida Department of State 10. "OFFICERS AND DIRECTORS MUE SITE AANEDRA EMIGDIO MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST ZIP CHY-SI-ZIP THUE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-21P CITY-ST-ZIP таці THILE STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY - \$1 - 71P CITY-ST-ZIP DUE TiTLE IN THIS SPACE HAME NAME STREET ADDRESS STREET ADDRESS Official 2P CITY-ST-ZIP Title TITLE 113845 NAME STREET ADDRESS STREET ADDRESS CONTRACTOR CITY-ST-ZIP Litt TITLE

12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(r). Florida Statutes: Florition certify that the entering 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 about or the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutey, and that my name appears in floor through the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutey, and that my name appears in floor through the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutey.

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