2001 UNIFORM BUSINESS REPORT (UBR)

Apr 20, 2001 8:00 am Secretary of State DOCUMENT # P93000029976 1. Entity Name SIDOR INVESTMENTS INC. 04-20-2001 90002 046 ***150.00 Principal Place of Business Mailing Address 10841 S.W. 68TH DRIVE 10841 S.W. 68TH DRIVE MIAMI FL 33173 MIAMI FL 33173 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.~ ----DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0427611 Not Applicable 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 Name DELGADILLO, HERNAN Street Address (P.O. Box Number is Not Acceptable) 10841 S.W. 68TH DRIVE **MIAMI FL 33173** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees X (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PD TITLE ☐ Delete TITLE ☐ Change ☐ Addition DELGADILLO, HERNAN E NAME NAME STREET ADDRESS 10841 S.W. 68TH DR. STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33173** CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME QUINONES. DORIS NAME STREET ADDRESS STREET ADDRESS 10841 S.W. 68TH DR. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33173** Delgadillo, Jaime 20100 Spinning Wheel Place ☐ Delete TITLE Change Addition NAME **DELGADILLO, JAIME** NAME STREET ADDRESS STREET ADDRESS 201 AMBERFILLE LANE Germantown, Maryland 20874 CITY-ST-ZIP CITY-ST-ZIP GAITHERSBURG MD TITI F TD ☐ Delete TITLE ☐ Change Addition NAMÉ DE WOLFF, MARIA C NAME STREET ADDRESS STREET ADDRESS CALLE 67 #735 APT. 201 CITY-ST-ZIP CITY-ST-ZIP **BOGOTA, COLOMBIA** ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition

13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE

NAME STREET ADDRESS

CITY-ST-ZIP

Haras Jalgadella

SIGNATURE AND TYPED DEPRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/01

305-279-5157

Daytime Phone #