FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 23, 2002 8:00 am § Secretary of State DOCUMENT # P93000047733 1. Entity Name 04-23-2002 90416 012 ***150.00 LA MISION, U.S.A., INC. Principal Place of Business Mailing Address 403 E. DAVIS BLVD. 403 E. DAVIS BLVD. TAMPA FL 33606 TAMPA FL 33606 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3192338 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VERSAGGI, RUSSEL S. Street Address (P.O. Box Number is Not Acceptable) 403 E: DAVIS BLVD. TAMPA FL 33606 Zip Code City FL 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. ٤. SIGNATURE DATE 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ■ Addition ☐ Delete TITLE TITLE PD NAME NAME VERSAGGI, RUSSELL S 403 E DAVIS BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL Addition ☐ Change ☐ Delete TITLE TITLE SD NAME NAME VERSAGGI, RUSSELL S. STREET ADDRESS STREET ADDRESS 403 E DAVIS BLVD CITY-ST-ZIP CITY-ST-ZIP TAMPA FL ☐ Addition Change ☐ Delete TITLE TITLE SD NAME NAME ALFARO, JUAN M STREET ADDRESS STREET ADDRESS 5A CALLE PONIENTE #3778/COLONIA ESCALON CITY-ST-ZIP CITY-ST-ZIP SAN SALVADOR EL ☐ Addition ☐ Change ☐ Delete TITLE TITLE SD NAME NAME MENENDEZ, GERARDO STREET ADDRESS STREET ADDRESS 12 AVENIDA SUR, ENTRE 27 Y 29 CITY-ST-ZIP CITY-ST-ZIP CALIENTE PONIENTE SA ☐ Addition Change TITLE TITLE ☐ Delete VD NAME NAME ALFARO, FERNANDO STREET ADDRESS STREET ADDRESS 5A CALLE PONIENTE #3778, COLONIE ESCADON CITY-ST-ZIP CITY-ST-ZIP SAN SALVADOR, EL SALVADOR ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: