FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

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STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000076619 (4) DOCUMENT

B.P. INTERNATIONAL HOLDINGS, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Place of Business Maiting Address **501 VILLABELLA AVENUE** 501 VILLABELLA AVENUE **CORAL GABLES FL 33146** CORAL GABLES FL 33146 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/30/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0452397 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 26 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. Yes Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PENICHET, PAUL F 201 ALHAMBRA CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 711 83 CORAL GABLES FL 33134 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.5 TITLE PENICHET, JOSE F 1.2 NAME 501 VILABELLA AVE. STREET ADDRESS 1.3 STREET ADDRESS **CORAL GABLES FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE BRANDAO, VICTOR **BRANDO, VICTOR** NAME 2.2 NAME BBI OCEAN DRIVE APT 22B KEY BISCAYNE, FL 33149 4400 MONSERATE ST STREET ADDRESS 2.3 STREET ADDRESS CORAL GARLES EL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE PENICHET, SILVIA F NAME 3.2 NAME 501 VILABELLA AVE. 3 3 STREET ADDRESS STREET ADDRESS CORAL GABLES FL 3.4. CITY - ST- ZIP CITY-ST-ZIP DELETE 4.1 TITLE BRANDAO, MARIA E RICHARGE LA 881 OCEAN DRIVE, APT. 22B Change Addit TITLE Brandao. Maria e 4 2 NAME NAME 4409 MONSERATE ST 4.3 STREET ADDRESS STREET ADDRESS KEY BISCAYNE, FL 33149 GORAL GABLES FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Ad.'''' TITLE 6.1 T/T1F NAME 6.2 NAME

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP