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2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 28, 2001 8:00 am DOCUMENT # P93000086563 Secretary of State MISTY HORSE, INC. 03-28-2001 90187 020 ***150.00 Principal Place of Business Mailing Address 200 SOUTH BISCAYNE BLVD. 200 SOUTH BISCAYNE BLVD. 41 FLOOR 41 FLOOR MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0473202 Not Applicable Zip Country Zip 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 RJVF CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 200 SOUTH BISCAYNE BLVD. 41 FLOOR **MIAMI FL 33131** City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. LNURIA, JOSUS A 200 S. BISORYNE Blvd., Ste # 4100 ☐ Delete TITLE LAURIA, JESUS A NAME % TWO S BISCAYNE BLVD #3400 STREET ADDRESS STREET ADDRESS MIAMI, F1, 33131 CITY-ST-ZIP MIAM! FL CITY-ST-ZIP DVPS ☐ Delete TITLE Losseur, Guillormo 2005. Bisonyne Blvd., Ste # 4100 MIAMI, Fl 39131 LESSEUR, GUILLERMO NAME % TWO S BISCAYNE BLVD #3400 STREET ADDRESS STREET ADDRESS MIAM! FL CITY-ST-ZIP CITY-ST-ZIP GARBATI, MARIA CLARA De Change Addition 200 5. BISONYNE Blud., Ste # 4100 TITLE . Delete ... GARBATI, MARIA CLARA NAME NAME C/O TWO S BISCAYNE BLVD., #3400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE MIAM) FL MIAMI, F1 33131 ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 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.