2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9400052539 May 22, 2000 8:00 am Secretary of State CARIBBEAN COMPUTER EXPORTS, INC. 05-22-2000 90050 025 ***158.75 Mailing Address Principal Place of Business 5201 BLUE LAGOON DRIVE 5201 BLUE LAGOON DRIVE SUITE 700 SUITE 700 MIAMI FL 33126 MIAMI FL 33126-2092 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State A FFI Number City & State S9=3.25.56.94 Not Applicable \$8.75 Additional 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 Kers osa HERRERA, W A Street Address (P.D. Box Number is Not Acceptable) E **5201 BLUE LAGOON DRIVE SUITE #700** Suite 700 MIAMI FL 33126 Zip Co学3126 City MIAMI 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. Jose M. Kerbasa. Vice - President SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. 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. ☐ Addition TITLE ☐ Delete TITI F NAME NAME EWERLOF, FREDRIK STREET ADDRESS STREET ADDRESS 5201 BLUE LAGOON DR STE 700 CITY-ST-ZIP CITY-ST-ZIP <u>miami fl</u> ☐ Change Addition ☐ Delete TITLE TITLE NAME GONZALEZ, HUMBERTO J STREET ADDRESS STREET ADDRESS 5201 BLUE LAGOON DRIVE, SUITE 700 CITY-ST-ZIP CITY-ST-ZIP <u>Miami Fl</u> ☐ Change ☐ Addition Delete TITLE NAME HERRERA, WILLIAM A STREET ADDRESS STREET ADDRESS 5201 BLUE LAGOON DR STE 700 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME LINDROTH, HANS STREET ADDRESS STREET ADDRESS 5201 BLUE LAGOON DR, STE 700 CITY-ST-ZIE CITY-ST-ZIP MIAMI FL 33126 **Addition** ☐ Delete TITLE TITLE Rusosa Jose M. 5201 BLUE LAGOON DR STE 700 NAME NAME STREET ADDRESS STREET ADDRESS 33126 CITY-ST-ZIP IMAIM CITY-ST-ZIP ☐ Change ■ Addition TITI F ☐ Delete TITLE 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. Kei605a, Vice-President

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: