FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State
05-14-2002 90362 046 ***158.75

DOCUMENT # P94000065897

1. Entity Name
Century Technology, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1754 SW 109th Terrace	1754 SW 109th Terrace
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Davie, FL	City & State: Davie, FL
Zip: 33324 Country: USA	Zip: 33324 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0522200 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Santos, Mauro C. Esq
Street Address (P.O. Box Number is Not Acceptable): 25 SE Second Avenue
Ingraham Bldg, Suite 1235
City: Miami FL Zip Code: 33131

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 _____ DATE
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 Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: DP NAME: Mendes, Jose STREET ADDRESS: Rua Caiubi, 324, apt 32 CITY-ST-ZIP: São Paulo - SP 05010-000	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: DVPS NAME: Filho, Alberto Sentieri STREET ADDRESS: Rua Guilhermina 291 CITY-ST-ZIP: São Paulo-SP 02469-040	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: DT NAME: Mattos, Roberto STREET ADDRESS: 9 Sandburg Drive CITY-ST-ZIP: Morganville, NJ 07756	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Roberto Mattos Roberto M Mattos 04/24/02 (732) 617-7251
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #