2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # [P95000002954(2)]?

1. Entity Name
GOLD CUP REAL ESTATE COMPANY

FILED
May 17, 2000 8:00 am
Secretary of State
05-17-2000 90948 028 ***150.00

100842

[redacted]

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
10201 HAMMOCKS BLVD. SUITE 153-238 MIAMI FL 33196 US	10201 HAMMOCKS BLVD. SUITE 153-238 MIAMI FL 33196-4712 US

2. Principal Place of Business	3. Mailing Address
2665 South Bayshore Drive	
Suite, Apt. #, etc. 703	Suite, Apt. #, etc.
City & State Coconut Grove Fl	City & State
Zip 33133 Country	Zip Country

4. FEI Number ~~65-0349901~~ 650551245 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MUR, LAZARO J
8400 N.W. 52 STREET
SUITE 207
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name MUR, LAZARO J.
Street Address (P.O. Box Number is Not Acceptable) 2665 South Bayshore Drive
Suite 703
City Coconut Grove FL Zip Code 33133

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] 4/28/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPS GONZALEZ, MIGUEL A % 8400 N.W. 52 STREET, #207 MIAMI FL 33166 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Lazaro Mur c/o 2665 South Bayshore Drive Suite 7.. Suite 703 Coconut Grove Fl. 33133 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Miguel A. Gonzalez 2665 S. Bayshore Drive Ste #703 Coconut Grove, FLA 33133 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: [signature] 4/28/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR