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May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000003320 (5)

1. Corporation Name
MULTITONER INC.

Principal Place of Business

801 BRICKELL AVENUE
14TH FLOOR
MIAMI FL 33131

Mailing Address

5201 BLUE LAGOON DRIVE
SUITE 100
MIAMI FL 33126-2065
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

SKOLA, THOMAS J
5201 BLUE LAGOON DRIVE
SUITE 100
MIAMI FL 33126

3. Date Incorporated or Qualified

01/10/1995

3a. Date of Last Report

04/26/1996

4. FEI Number

65-0549294

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes

☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

Jesus R. Gonzalez

82 Street Address (P.O. Box Number is Not Acceptable)

2160 SW 137 Place

83

84 City

Miami

FL

85 Zip Code
33125

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 of person authorized to file this report

(NOTE: Registered Agent signature required when resigning)

4/27/97

12. OFFICERS AND DIRECTORS

TITLE	PTD	☐ DELETE
NAME	NASCIMENTO, ALEXANDER	
STREET ADDRESS	5201 BLUE LAGOON DRIVE #100	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☒ DELETE
NAME	MIRANDA, ROGERIO SILVA	
STREET ADDRESS	5201 BLUE LAGOON DRIVE SUITE 100	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	☒ DELETE
NAME	SKOLA, THOMAS J	
STREET ADDRESS	5201 BLUE LAGOON DRIVE STE 100	
CITY-ST-ZIP	MIAMI FL	

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE

Signature of person authorized to file this report

4/27/97

CR2E034 (9/96)