FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # P95000066910 (7)

1. Corporation Name
ALAWRA VENTURES, INC.

Principal Place of Business
420 LINCOLN ROAD SUITE #201
MIAMI BEACH FL 33139

Mailing Address
420 LINCOLN ROAD SUITE #201
MIAMI BEACH FL 33139

3. Date Incorporated or Qualified: 08/24/1995

3a. Date of Last Report: 8-24-95

4. FEI Number: 65-0609349 — 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

2. Principal Place of Business
21 1455 Michigan Ave
22 Suite, Apt #, etc. 13
23 City & State: Miami Beach FL
24 Zip
25 Country

2a. Mailing Address
26 1455 Michigan Ave
27 Suite, Apt. #, etc. 13
28 City & State: Miami Beach
29 Zip
30 Country

9. **Name and Address of Current Registered Agent**

WEBER, ALESSANDRA
420 LINCOLN ROAD SUITE #201
MIAMI BEACH FL 33139

10. **Name and Address of New Registered Agent**

81 Name: Anton Philipp
82 Street Address (P.O. Box Number is Not Acceptable): 1455 Michigan Ave
83
84 City: Miami Beach FL 85 Zip Code: 33139

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] Anton Philipp — DATE: 6-18-96

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	WEBER, ALESSANDRA	
STREET ADDRESS	420 LINCOLN ROAD SUITE #201	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	☒ Change ☐ Addition
1.2 NAME	Anton Philipp	
1.3 STREET ADDRESS	1455 Michigan Ave	
1.4 CITY-ST-ZIP	Miami Beach FL 33139	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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] Anton Philipp — 6-18-96 — 305 5310390

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)