FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jul 22, 2002 8:00 am Secretary of State DOCUMENT # P95000069531 1. Entity Name 07-22-2002 90164 047 ***150.00 THE ROSE TREE COTTAGE, INC. Principal Place of Business Mailing Address 388 MIRACLE MILE 388 MIRACLE MILE **CORAL GABLES FL 33134** CORAL GABLES FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0625978 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ESQUIJAROSA, JOSEFINA R Street Address (P.O. Box Number is Not Acceptable) 388 MIRACLE MILE CORAL GABLES FL 33134 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME ESQUIJAROSA, JOSEFINA R NAME STREET ADDRESS 3416 SW 17 STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33145 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME ESQUIJAROSA, JOSEFINA R NAME STREET ADDRESS STREET ADDRESS 3416 SW 17 STREET CITY-ST-ZIP **MIAMI FL 33145** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 directo 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 changed, or on an attachment with an address, with all other like empowered.

4 pg 5 0000009 53/

July 16, 2002

Division of Corporations Uniform Business Report Filings P.O. BOX 1500 Tallahassee, Florida 32302

The Rose Tree Cottage, Inc 388 Miracle Mile Coral Gables, Florida 33134

RE: Uniform Business Report FEI 65-0625978

To Whom It May Concern: Upon our arrival of our yearly family vacation I came upon the 2002 Uniform Business Report, while checking all of our other mail at the shop. To my surprise I saw that the renewal had increased beyond belief. I then called your office to inquire about the sudden increase and was informed that this was my second notice and this was a past due penalty. However, this was the only (UBR) form that I had received. My previous records will confirm the fact that I have never been late in filing and submitting my checks to the state. Therefore, I am sending my check in the amount of \$150.00 as I was informed to do by your department with a letter of explanation. If there are any questions please feel free to contact me between Monday through Friday from 9 to 6p.m.

Sincerely,

Josefina Esquijarosa President/Owner