2001 UNIFORM BUSINESS REPORT (UBR) DÖCUMENT # P95000081585 99-01 1. Entity Name Merca, INC. 01 JUL 24 PM 3: 38 SECRETARY OF STATE TALLAHASSEE FLORIDA Principal Place of Business Mailing Address 12335 SW 29 Tell FL 33175 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 65-0616603 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Recuired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent andres vidailler Street Address (P.O. Box Number is Not Acceptable) 12335 SW 29 Terr. Miami. FL 33175 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. SIGNATURE 9. This corporation is eligible to satisfy its Intangible 2 ETATEAN AND INVESTIGATION 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ITLE Delete TITLE: Change ☐ Addition Andres Vidaill VAME NAME 12335 STREET ADDRESS STREET ADDRESS JITY-ST-ZIP CITY-ST-ZIP liami IILE Delete . TITLE Change Addition MME NAME STREET ADDRESS TREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP <u>***2180.00</u> ****765.00 TLE ☐ Delete TITLE ☐ Change ☐ Addition AME TREET ADDRESS STREET ADDRESS CITY ST-ZIP :TV-ST-7IP n F ☐ Change Addition ☐ Delete TITLE ME NAME REET ADDRESS STREET ADDRESS IY-ST-ZIP CITY-ST-ZIP 'n. Delete Change Addition ME NAME REET ADDRESS STREET ADDRESS Y-\$1-71P CITY-ST-ZIP í.E ☐ Delete ☐ Change ☐ Addition ME NAME IEET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 attachingent with an address, with all other like empowered.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MERCA, INC.

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION. DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS. THANK IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT.

CORDIALLY,

Jose Andres Vidailles JOSE ANDRES VIDAILLER

-PRÉSIDENT