## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 25, 2001 08:00 AM DOCUMENT # P9600005195 1. Entity Name **Secretary of State** JAZZ INTERNATIONAL, INC. Principal Place of Business Mailing Address 690 S.W. 1 COURT 690 S.W. 1 COURT MIAMI FL MIAMI FL33130 33130 2. Principal Place of Business 3. Mailing Address 2960 BLUE JAY DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For COOPER CITY 65-0635232 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPARKS LAVERNE SPARKS LAVERNE 12005 NORTH AVIARY DRIVE Street Address (P.O. Box Number is Not Acceptable) 2960 BLUE JAY DRIVE COOPER CITY FL33026 US City Zip Code COOPER CITY 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. LAVERNE SPARKS 04/25/2001 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 FILE NOW!!! FEE 10 \$100.00\_\_\_\_\_\_\_\_After MAY 1, 2001 Fee will be \$550.00.\_\_\_\_\_ 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) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE M CR2E034 (11/00) ☐ Delete TITLE ☐ Addition X Change MOSS CEPEDA NIKO MAME CEPEDA NIKO NAME 12005 N AVIARY DR STREET ADDRESS STREET ADDRESS 2960 BLUE JAY DRIVE CITY-ST-ZIP COOPER CITY $\mathbf{FL}$ CITY-ST-ZIP COOPER CITY 33026 P ☐ Delete TITLE X Change NAME SPARKS JAMES NAME SPARKS JAMES STREET ADDRESS 12005 NORTH AVIARY DR STREET ADDRESS 2960 BLUE JAY DRIVE CITY-ST-ZIP COOPER CITY $\mathbf{FL}$ CITY-ST-ZIP COOPER CITY FL33026 ☐ Delete TITLE EVP X Change ☐ Addition SPARKS LAVERNE NAME LAVERNE SPARKS STREET ADDRESS 12005 NORTH AVIARY DRIVE STREET ADDRESS 2960 BLUE JAY DRIVE CITY-ST-ZIP COOPER CITY 33026 CITY-ST-ZIP COOPER CITY 33026 FL. TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition 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 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.

04/25/2001

Daytime Phone #

Date

SIGNATURE: LAVERNE SPARKS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR