2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jan 31, 2001 8:00 am DOCUMENT # P9600026021 **Secretary of State** F. DIAZ PRESS DISTRIBUTION, INC. 01-31-2001 90299 045 ***150.00 Principal Place of Business Mailing Address 1237 NW 112TH ST. 1237 NW 112TH ST. MIAMI FL 33167 MIAMI FL 33167 Principal Place of Business 7330 Alle Mailing Address ろひ Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0652004 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DIAZ. FREDDY_ 1237 NW 112TH ST. MIAMI FL 33167 Intro the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above no submits this stateme SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This co rporation is eligible to satisfy its Intarigible 10. Election Campaign Financing \$5.00 May Be ng requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Tax fili Trust Fund Contribution Added to Fees (See drite fia on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) TITLE Delete TITLE Change NAME DIAZ, FREDDY NAME STREET ADDRESS STREET ADDRESS 1237 NW 112TH ST. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33167** ☐ Delete TITLE ■ Addition TITLE 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 Delete TITLE ☐ 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 Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 of supplier 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.

ICER OR DIRECTOR