2003 FOR PROFIT CORPORATION

Mar 28, 2003 8:00 am § Secretary of State **FILED UNIFORM BUSINESS REPORT (UBR)** P96000072771 DOCUMENT # 1. Entity Name 03-28-2003 90111 038 ***150.00 ELSA BENITEZ, INC. Principal Place of Business Mailing Address 1767 SENTRY PARKWAY WEST 1767 SENTRY PARKWAY WEST SUITE 320 SUITE 320 BLUE BELL PA 19422-2245 BLUE BELL PA 19422-2245 2. Principal Place of Business 3. Mailing Address 510 Township Line Road 510 Township Line Road Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Suite 150 Suite 150 City & State City & State 4. FEI Number Applied For 65-0691230 Blue Bell, PA Blue Bell, PA Not Applicable Zip حي -~Country (-> = \$8.75 Additional 5. Certificate of Status Desired 19422 U.S.A. 19422 U.S.A. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILLNER, ROBIN I ESQ Street Address (P.O. Box Number is Not Acceptable) C/O HERZFELD & RUBIN 801 BRICKELL AVENUE #1501 MIAMI FL 33131 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 \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10.3 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITI F Change ☐ Addition President BENITEZ, ELSA NAME NAME Elsa Benitez C/O 1767 SENTRY PKWY W STE 320 STREET ADDRESS STREET ADDRESS c/o 510 Township Line Road, Ste 150 CITY-ST-ZIP BLUE BELL PA 19422-2245 CITY-ST-ZIP Blue Bell, PA TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP-☐ 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-7IP CITY-ST-7IP ☐ Delete TITI E ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS

12. Thereby 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 10 or Block 11 if changed, or on an attachment with an address, with all oth

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

QUIFEIsa Benitez, President

3/7/03 215-653-0110

Change

Addition

CR2E034 (10/02)