2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P96000100482 Apr 03, 2000 8:00 am Secretary of State LITTLE HAVANA MIAMI INC. 04-03-2000 90125 008 ***150.00 Mailing Address Principal Place of Business 25 S.E. 2ND AVENUE. SUITE 730 25 S.E. 2ND AVENUE. SUITE 730 C/O BLAXBERG, GRAYSON & SINGER, P.A. C/O BLAXBERG, GRAYSON & SINGER, P.A. MIAMI FL 33131-1696 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address STH STARRET 3663 S.W STA STREET 3663 S.W Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE THIRD FLOOR THIRD Floor Applied For City & State HIAmi City & State 4. FEI Number 65-0727504 - FLORIDA Florion Not Applicable MIAMI Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired U.S.A. 3*313*5 USA. 33135 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VALLS, FELIPE A JR Street Address (P.O. Box Number is Not Acceptable) 3663 S.W. 8TH STREET THIRD FLOOR **MIAMI FL 33135** Zip Code the purpose of changing its registered office or registered agent, or both, in the State of Florida The above named entity submits SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) d agent and title if applicable ___FILE,NOW!!! FEE IS \$150.00 _ 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition Delete TITLE TITLE VALLS, FELIPE A JR NAME NAME STREET ADDRESS STREET ADDRESS 3663 S.W. 8TH STREET THIRD FLOOR CITY-ST-ZIP CITY-ST-7IP MIAMI FL Change Addition Delete TITLE VALLS, FELIPE A SR NAME STREET ADDRESS STREET ADDRESS 3663 S.W. 8TH STREET THIRD FLOOR CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME

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 exclude 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 of the empowered. FELIPE A VAIIS, JR

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

PRESIDENT