FILED ಸಾಧ್ಯ Uniform Business Report (UBR) May 03, 2000 8:00 am Secretary of State DCUMENT # **P97000006547** FINESS CONTROL MANAGEMENT, INC. 05-03-2000 90053 024 ***150.00 Heat Place of Business Mailing Address SW 16TH TERR 3642 SW 16TH TERR SUITE 315 OUT MIAMI FL 33145-1761 ٣ كان سيجين 725050 " FL 33145 Principal Place of Business 3. Mailing Address 3642 SW 14th rerr 145 MODEITA DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc Suire Applied For 4. FEI Number City & State City & State 65-0722391 6ABles Miami Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 9 33134 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PEREZ, RAMIRO J Street Address (P.O. Box Number is Not Acceptable) 3642 SW 16TH-TERR OUT SUITE 315 **MIAMI FL 33145** Zip Code The above named entity sugmits this statement of the purpose of changing its registered office or registered agent, or both, in the State of Florida. SNATURE _______Signature, typed nd title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 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 Trust Fund Contribution Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS ได้เกิดเป็นได้เก ☐ Change TITLE 22 Delete NARANJO, VICENTE C NAME ΛE 3642 SW 16TH TERR STREET ADDRESS EET ADDRESS MIAMI FL 33145 CITY-ST-ZIP -ST-ZIP Pregioent. Bomirot Perez Change Addition ☐ Delete PEREZ. RAMIRO J ıΕ 3642 SW/414 TEN STREET ADDRESS EET ADDRESS 3642 SW 16TH TERR Hrowith 33145 CITY-ST-ZIP r-st-zip MIAMI FL 33145 ☐ Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS EET ADDRESS CITY-ST-ZIP (-ST-ZIP Change Addition Delete NAME STREET ADDRESS EET ADDRESS CITY-ST-ZIP Y-ST-ZIP Change ☐ Addition Delete NAME ٨E EET ADORESS STREET ADDRESS CITY-ST-ZIP Y-ST-ZIP Delete ☐ Channe ΛE EET ADDRESS STREET ADDRESS CITY-ST-ZIP Y-ST-ZIP I hereby certify that the information supplied with this filling 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 acourage and that my signature shall have the same legal effect as if made under oath; that I am an officer or direction of the corporation or the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 changed, or on an attachment with an address, with all otherwise empowered. SIGNATURE AND THEE OR PRINTER NAME

IGNATURE: