2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND

FILED DOCUMENT # P97000013920 Apr 19, 2000 8:00 am 1. Entity Name Secretary of State H. F. PROJECTS & BUSINESS, INC. 04-19-2000 90111 005 ***150.00 Mailing Address Principal Place of Business 5516 NW 101 CT 5516 NW 101 CT MIAMI FL 33178-2642 MIAMI FL 33178 2. Principal Place of Business 3. Mailing Address 6595 NW 36th. Street 6595 NW 36th. Street Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. # 213 # 213 Applied For City & State City & State 4. FEI Number 65-0731714 Miami, FLMiami, FL Not Applicable ^{Zip} 33166 Country \$8.75 Additional 5. Certificate of Status Desired US 33166 US Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FRANK, MAURICIO H Street Address (P.O. Box Number is Not Acceptable) 5516 N.W. 101 COURT DORAL PINES **MIAMI FL 33178** Zip Code FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 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. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PD Addition PD ☐ Delete TITI F TITLE Frank, Herbert D. FRANK, HERBERT D NAME 5116 NW 116 Ct. 5516 NW 101 CT. DORAL PINES STREET ADDRESS STREET ADDRESS Miami, FL 33178 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33178** Thange Addition Delete. TITLE TITLE Frank, Mauricio H. FRANK, MAURICIO H NAME NAME 5116 NW 116 Ct. STREET ADDRESS 5516 NW 101 CT. DORAL PINES STREET ADDRESS CITY-ST-ZIP Miami, FL 33178 CITY-ST-ZIP MIAMI FL 33178 Change ☐ Addition □ Delete TITLE TITLE Frank, Laura D. FRANK, LAURA D NAME NAME 5116 NW 116 Ct. 5516 NW 101 CT. DORAL PINES STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Miami, FL 33178 CITY-ST-ZIP **MIAMI FL 33178** Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE 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.

Mauricio H. Frank

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-00 (305)463-8501