2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003
Secretary of State

DOCUMENT# P97000026264

Entity Name: N & N INTERNATIONAL, INC.

Current Principal Place of Business:

12311 SW 106 STREET
MIAMI, FL 33186

New Principal Place of Business:

18901 NW 55 AVENUE
OPA LOCKA, FL 33055

Current Mailing Address:

12311 SW 106 STREET
MIAMI, FL 33186

New Mailing Address:

18901 NW 55 AVENUE
OPA LOCKA, FL 33055

FEI Number: 65-0740083 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, CHARLES L
9900 SW 168TH STREET
SUITE #9
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GOSINE, NARESH
Address: 12311 SW 106 STREET
City-St-Zip: MIAMI, FL 33186

Title: V ( ) Delete
Name: GOSINE, NARESH
Address: 12311 SW 106 STREET
City-St-Zip: MIAMI, FL 33186

Title: S ( ) Delete
Name: GOSINE, NADINE
Address: 12311 SW 106 STREET
City-St-Zip: MIAMI, FL 33186

Title: T ( ) Delete
Name: GOSINE, NARESH
Address: 12311 SW 106 STREET
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GOSINE, NARESH
Address: 18901 NW 55 AVENUE
City-St-Zip: OPA LOCKA, FL 33055

Title: V (X) Change ( ) Addition
Name: GOSINE, NARESH
Address: 18901 NW 55 AVENUE
City-St-Zip: OPA LOCKA, FL 33055

Title: S (X) Change ( ) Addition
Name: GOSINE, NADINE
Address: 18901 NW 55 AVENUE
City-St-Zip: OPA LOCKA, FL 33055

Title: T (X) Change ( ) Addition
Name: GOSINE, NARESH
Address: 18901 NW 55 AVENUE
City-St-Zip: OPA LOCKA, FL 33055

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NARESH GOSINE P 04/30/2003

Electronic Signature of Signing Officer or Director — Date