2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED O

NAME OF SIGNING OFFICER OR DIRECTOR

Feb 15, 2000 8:00 am Secretary of State DOCUMENT # **P97000034398** ANDEAN SPRING FLOWERS, INC. 02-15-2000 90019 017 ***150.00 Principal Place of Business Mailing Address 8880 NW 24TH TERR 8880 NW 24TH TERR DOOMING MIAMI FL 33172-2418 MIAMI FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0748714 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION COMPANY OF MIAMI Street Address (P.O. Box Number is Not Acceptable) 201 S BISCAYNE BLVD 1500 MIAMI CENTER 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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 11. OFFICERS AND DIRECTORS 12. ☐ Delete TITLE PRESIDENT ☐ Addition TITLE **GUILLERMO DUENAS ITURRALDE** GUILLERMO DUCTAS NAME NAME 477 NEWIGA AMAZONAS, OFICINA 201 477 AVENIDA AMAZONAS, OFICINA 207 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **QUITO, ECUADOR** CITY-ST-7IP OUTTO ECUADOR TREASURER X SECRETARY TITLE Change Change TITLE ☐ Delete JUAN PABLO DUENAS MORENO Tuon Pablo Dueñas Horano NAME NAME 477 AUGUIDA AMAZONOS, OFICINO 207 477 AVENIDA AMAZONAS, OFICINA 207 STREET ADDRESS STREET ACCRESS CITY-ST-ZIP QUITO, ECUADOR Quito Econdor CITY-ST-ZIP Delete ----Change ☐ Addition TITLE TITLE BUITRON, CARLOS A NAME NAME 8454 NW 14 ST STREET ADDRESS STREET ADDRESS **CORAL SPRING FL 33071** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS 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 restrict the empowered.

FILED