

FILE NOW: FILING FEE AFTER MAY.1ST IS \$550.00

FILED

Jun 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morfham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000035466
1. Corporation Name:

Natural Intelligence Corp.

Principal Place of Business	Mailing Address
1817 SW 107th Ave # 1808 Miami, FL 33165	NEW 7400 NW 7th St Suite 113 Miami, FL 33126

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number
NEW 21 7400 NW 7th ST # 113 Suite, Apt. #, etc. 22 City & State 23 Miami Zip 24 33126 Country 25 USA	26 7400 NW 7th St Suite, Apt. #, etc. 27 # 113 City & State 28 Miami, FL Zip 29 33126 Country 30 USA	4/21/97	Applied For Not Applicable
		5. Certificate of Status Desired	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

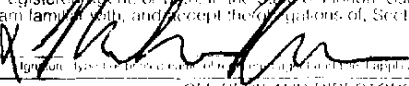
9. Name and Address of Current Registered Agent

Pedro Corzo
1817 SW 107th Ave, Suite 1808
Miami, FL 33165

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
Nicolas A. Perez	33146
82 Street Address (P.O. Box Number is Not Acceptable)	
521 Vilabella Avenue	
83 City	
Coral Gables	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:  DATE: 5/12/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Registered Agent ☒ DELETE	11 TITLE	Director ☐ Change ☒ Addition
NAME	Pedro Corzo	12 NAME	Registered Agent
STREET ADDRESS	1817 SW 107 Ave # 1808	13 STREET ADDRESS	Nicolas A. Perez
CITY-ST-ZIP	Miami, FL 33165 ☐ DELETE	14 CITY-ST-ZIP	521 Vilabella Avenue
TITLE	☐ DELETE	21 TITLE	Coral Gables, FL 33146 ☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	☐ DELETE	31 TITLE	Ramiro Gutierrez ☐ Change ☒ Addition
NAME		32 NAME	5731 NW 201 Lane
STREET ADDRESS		33 STREET ADDRESS	Miami, FL 33015
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	☐ DELETE	41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	☐ DELETE	51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed by an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/97)