2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P970000 40337 FII FD Sublime Trading Company 00 HOV 17 PM 2:32 Principal Place of Business SECRETARY OF STATE TALLAHASSEE, FLORIDA 21440 Highland Lakes Blvd. Aventura, FLORIDA 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 65-0750154 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 JOSE BRAULIO DE CARVALHO Street Address (P.O. Box Number is Not Acceptable) 21440 Highland Lakes Blud Aventura, FL 33179 City Zip Code 8. The above named entit ment for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE X of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be After MAY:1, 2000 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Addition NAME JOSE BRAULIO DE CARVALHO NAME STREET ADDRESS 21440 Highland Lakes Blud. STREET ADDRESS CITY-ST-ZIP Aventură, FL 33179 CITY-ST-ZIP TITLE Detete ☐ Change ☐ Addition NAME SUSAN PETEKS 21440 Highland Lakes Blvd. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 33179 Aventura, FL CITY-ST-ZIP tmr ☐ Defete **VAME** STREET ADDRESS STREET ADDRESS JITY-ST-ZIP CITY-ST-ZIP THE Detete TITLE ☐ Addition JAME NAME TREET ADDRESS STREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP iTtE ☐ Delete TITLE Change ☐ Addition NAME TREET ADDRESS STREET ADDRESS ITY-ST-ZIP CITY-ST-71P TLE ☐ Delete TITLE Change ■ Addition NAME TREET ADDRESS STREET ADDRESS TY-ST-7IP CITY-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 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 of 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 3. I hereby certify that the information suppli SIGNATURE: 🕸 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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## SUBLIME TRADING COMPANY DOC.#P97000040337

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS. THANK IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT.

CORDIAM

<del>JOSÈ BRAULIO</del> DE CARVALHO

PRESIDENT