FILE NOW: FILING FEE AFTER MAY 18T 18 \$550.00

FLORIDA DEPARTMENT OF STATE **PROFIT** CERPORATION Sandra B. Mortifall FILED ANNÜ**A**L REPORT Secretary of State DIVISION OF CORPORATIONS **19**98 98 JUL 24 PM 12: 20 **DOCUMENT #** P97000056578 (2) SECRETARY OF STATE TALLAHASSEE, FLORIDA UNION INTERNATIONAL EXPRESS INC. Principal Place of Business Mailing Address 5523 NW 72ND AVE 5523 NW 72ND AVE MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/27/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 65-0784717 Suite, Apt. #, etc. \$8.75 Additional Suite. Ant. #. etc.  $\Box$ 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible □ No Personal Property Tax due June 30. ☐ Yes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name ONATE, MAURICIO FELIX VARGAS A Street Address (P.O. Box Number is Not Acceptable) 9440 WEST FLAGLER ST., APT. 103 82 **MIAMÍ FL 33174** 5523 NW 72 AVE 63 84 City 85 Zip Code 11. Pursuant to the provisions of Soctions 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. Thereby accept the appointment as registered agent, and anytic yith, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (10/97) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change DELETE Addition TITLE 1.1 TITLE **ARTAVIA. CARLOS** 1.2 NAME NAME CR2E034 SAN JOSE, COSTA RICA ALAJUELA 1.3 STREET ADDRESS STREET ADDRESS **COSTA RICA** 1.4 CITY-ST-ZIP CITY-ST-ZIP 500002601645 -07/29/38--01064--004 DELETE Addition 2.1 TITLE TITLE **ÖBANDO. JUAN CARLOS** NAME 2.2 NAME SAN JOSE, COSTA RICA ALAJUELA STREET ADDRESS 2.3 STREET ADDRESS \*\*\*\*150.DU \*\*\*\*150.00 **COSTA RICA** CITY - QT - ZIP 2. 4 CITY-ST-ZIP DELETE Спапре \_\_\_ Addition 3.1 TITLE TITLE ARGUELLO, JOSE LUIS NAME 3.2 NAME **ALAJUELA COSTA RICA** 3.3 STREET ADDRESS STREET ADDRESS **ALAJUELA** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE CADET, ALVARO 4.2 NAME NAME ALAJUELA COSTA RICA 4.3 STREET ADDRESS STREET ADDRESS ALAJUELA CITY-ST-ZIP 4.4 City-St-ZiP Addition DELETE Change 5.1 TITLE TiTLE ARTAVIA. GONZALO 5.2 NAME NAME HEREDIA STREET ADDRESS 5.3 STREET ADDRESS **OOSTA RICA** CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Addition 61 TITLE TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 or organ attachment with an address.

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05/13/98