FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

CHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI

Apr 30, 2001 8:00 am Secretary of State DOCUMENT # P97000057695 1. Entity Name MARITE, INC. 04-30-2001 90024 026 ***150.00 Principal Place of Business Mailing Address 914 WEST 22ND STREET 914 WEST 22ND STREET HIALEAH FL 33010 HIALEAH FL 33010 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0765740 Not Applicable Zip Country Zip 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 <u>Carnero,</u> <u>Maria</u> CARNERO, MARIA V Street Address (P.O. Box Number is Not Acceptable) 815 W. 34th Street 7682 N.W. 168TH TERRACE ... MIAMI FL 33015 City Zip Code 3 3 0 1 2 Hialeah, Fl. 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. (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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) PS **X** Change Delete TITLE ☐ Addition TITLE CARNERO, MARIA Y NAME Carnero. Maria: V. NAME STREET ADDRESS STREET ADDRESS 7682 N W 168TH TERRACE 815 W. 34th Street CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33015 Hialeah, F1. 33012 Change ☐ Addition TITLE TITLE 🔀 Delete DIAZ, GUSTAVO JR NAME NAME Diaz, Gustavo Jr. STREET ADDRESS STREET ADDRESS 7682 N. W. 168 TERR 815 W. 34th Street CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33015 <u> Hialeah, Fl. 33012</u> ☐ Change ☐ Addition Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 all other like empowered.