2001 UNIFORM BUSINESS REPORT (UBR)

May 10, 2001 8:00 am Secretary of State DOCUMENT # **P97000087820** PUNTANA TRADING CORP. 05-10-2001 90177 049 ***150.00 Principal Place of Business Mailing Address 9600 W SAMPLE RD 9600 W SAMPLE RD #505 CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 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 65-0790277 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 FERRARI, JUAN Street Address (P.O. Box Number is Not Acceptable) 9600 W SAMPLE RD STE 505 **CORAL SPRINGS FL 33065** 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. (NOTE: Registered Agent signature required when reinstating) DATE 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 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME FERRARI, JUAN STREET ADDRESS STREET ADDRESS 9600 W SAMPLE RD STE 505 CITY-ST-78 CITY-ST-ZIP CORAL SPRINGS FL 33065 TITLE ☐ Delete TITLE Change ☐ Addition NAME BONTNICK, BERNARD NAME STREET ADDRESS STREET ADDRESS 9600 W SAMPLE RD STE 505 CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33065 TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

CITY-ST-ZIP