-FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2005 8:00 am
Secretary of State

TALLAHASSEE, FLORIDA

DOCUMENT # P95000021179

1. Entity Name: Century Overseas Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
785 Crandon Blvd	785 Crandon Blvd.
Suite, Apt. #, etc. Unit 706	Suite, Apt. #, etc. Unit 706
City & State Key Biscayne	City & State Key Biscayne
Zip 33149 Country FL.	Zip 33149 Country FL.

ep DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1012873 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Corporate Access, Inc.

Street Address (P.O. Box Number is Not Acceptable): 236 East 6th Avenue

City: Tallahassee FL Zip Code: 32303

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 _____ DATE
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: President Robert Maquinay 785 Crandon Blvd. Unit 706 Key Biscayne FL. 33149	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: 800050987618 04/16/05--01001--033 **150.00
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Robert Maquinay Feb. 28 / 2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Robert Maquinay - President.