FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jan 30, 2001 8:00 am Secretary of State DOCUMENT # P98000021615 HILVIC INVESTMENT, INC. 01-30-2001 90005 007 ***150.00 Principal Place of Business Mailing Address 1898 W. 8TH AVENUE 1898 W. 8TH AVENUE いいなずなのほう 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 65-0819124 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 Name MERY GOMEZ, HILDA Street Address (P.O. Box Number is Not Acceptable) 1898 W. 8TH AVENUE HIALEAH FL 33010 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition NAME MERY GOMEZ, HILDA NAME STREET ADDRESS STREET ADDRESS 1898 W. 8TH AVENUE CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33010 TITLE ☐ Delete TITLE Change ☐ Addition NAME ESPINDOLA, JAVIER NAME STREET ADDRESS STREET ADDRESS 1898 W. 8TH AVENUE CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33010 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DIDE ⁻ ☐¹Detete ~ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE: HILDA METRY GOMEZ 01/09/2001 305-163-0607

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