page 1. w/2 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000042484 FILED KAROL IMPORT & EXPORT, INC. 01 FEB 22 PM 2: 15 Principal Place of Business Mailing Address SECRETARY OF STATE 8210 A W. Flagler St. Lliami, FL 33144 3. Mailing Address 2. Principal Place of Business Suite. Apt #. etc. Suite. Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State ↑Applied For Not Applicable Z:p Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name victor P. Real 8210 A. West Flagler St. Liami, FL 33144 Street Address (P.O. Box Number is Not Acceptable) City Zip Code FL 8. The above named early submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (X) (NOTE: Registered Agent signature required when reinstating) hi and the illapplicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees See criteria on back) ... Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition Delete TITLE Change TITLE victor P. Real NAME NAME 8210 W. Flagler St. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP Addition ☐ Celete TITLE MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ****450.00 D Delete Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP Change Addition ☐ Defete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Change ☐ Addition Delete TITLE MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Celete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CITY-ST-ZIP 13. 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 report or suppliemental report is true and accordate 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 artificial, with all other like empowered.

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SIGNATURE (%)

PAGE 2012

KAROL IMPORT & EXPORT, INC. DOC.#P98000042484

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

AS PER YOUR INSTRUCTIONS YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE OF SUCH REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT.

SINCERELY,

PRESIDENT