2000 UNIFORM BUSINESS REPORT (UBR) FILED # TVAMENT# P98000042724 Mar 08, 2000 8:00 am 1. Entity Name **Secretary of State** First Cuban American Trading Corp. 03-08-2000 90129 007 ***150.00 Principal Place of Business Mailing Address SAME 1121 Crandon Blvd. #F-1007 Key Biscayne, FL 33149 A0025394_____ 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 Not Applicable 65-0838323 Zip 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 Ramon Puig Street Address (P.O. Box Number is Not Acceptable) 1121 Crandon Blvd., #F-1007 Key Biscayne, FL 33149 City Zio Code FI 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 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 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition Change TITLE Delete TITLE **PSD** NAME NAME Puig, Ramon STREET ADDRESS STREET ADDRESS 1121 Crandon Blvd. #F-1007 CITY-ST-ZIP CITY-ST-ZIP Key Biscayne, FL 33149 Addition TITLE ☐ Delete TITLE ☐ Change NAME Puig, Ileana STREET ADDRESS STREET ADDRESS Crandon Blyd. 3#F41007 CITY-ST-7IP CITY-ST-ZIP [] Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby cefity/hat 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 supplied ental 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 section of the sectio changed, or oh an attachme address with all other like empowered.

Ramon Puig, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE

(305)361-1290

Feb. 23, 2000