SIGNATURE:

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2000 UNIFORM BUSINESS REPORT (UBR) FILED May 02, 2001 8:00 am Secretary of State DOCUMENT # P9800051008 1. Entity Name WAGNER TELECOMMUNICATIONS CORPORATION 05-02-2001 90095 007 ***150.00 Principal Place of Business Mailing Address 5209 N.W. 74TH AVENUE 5209 N.W. 74TH AVENUE NO. 4 AT SUITE 214 NO. 4 AT SUITE 214 MIAMI FL 33166-4800 MIAMI FL 33166 3. Mailing Address 2. Principal Place of Business 74th. Avenue /Venue 5213 N.W. 5213 N.W. 7416. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0848450 Florida Not Applicable Miami \$8.75 Additional 5. Certificate of Status Desired U.SA U.S.A 33166 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Rodrigo Buevedo QUEVEDO, RODRIGO Street Address (P.O. Box Number is Not Acceptable) 5209 N.W. 74TH AVENUE NO. 4 AT SUITE 214 7416. 5213 N.W. Avenue **MIAMI FL 33166** Zip Code FL 33166 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 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, 2000 Fee will be \$550.00 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 ☐ Change ☐ Delete TITLE Quevedo Rodrigo TITLE QUEVEDO, RODRIGO NAME NAME 5213 N.W. 74th Avenue 5209 N.W. 74TH AVENUE SUITE 214 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33166** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIF ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY:ST:ZIP Addition ☐ Change TITI F ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP on supplied with this filing does no emental report is true and accurate of truster empowered to execute affy for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that my signature shall have the same legal effect as if made under oath; that I am an officer or director sport as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information indicated on this report or suppler of the corporation or the received changed, or on an attachment ed to execute th

Daytime Phone #