2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000082890 FILED. 1. Entity Name AAA SR. LOCK CORPORATION OI MAY -8 PM 12: 46 SECRETARY/OF/STRATE Principal Place of Business Mailing Address TALLAHAS SEE FELORIDA 14200 SW 132 AUE. Hiami, FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 05-08(05.587 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent F. Bustamante Name Street Address (P.O. Box Number is Not Acceptable) 14200 SW 132 AUE. *Miami* 33186 Zip Code FL 8. The above named entity submits and statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE FILE NOWIII PEE IS \$150,00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PID TITLE TITLE Addition Defete Luis F. Bustamante NAME NAME STREET ADDRESS 14200 SW 132 QUE. STREET ADDRESS CITY-ST-ZIP liami, FL 33186 CITY-ST-ZIP TITLE ___ Addition ☐ Defete TITLE Angela H. Jimenez. 14200 SW 132 ave. NAME NAME STREET ADDRESS STREET ADDRESS <u> Lliani, FC 33186</u> CITY - ST - ZIP CITY-ST-7IP ****300.00 ****300.00 Change ☐ Delete . Addition TITLE VAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP ☐ Change HTEE ☐ Delete TITLE Addition JAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE Change ■ Addition Delete_ IAME NAME TREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 13. Thereby certify that the information spapiled with his 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 proof or supplemental report is true and accurate and that my's gnature 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 true ee 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 a grant address, with all other like empowered.

Delete

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

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DITY - ST - ZIP

Change

Addition



AAA SR. LOCK CORPORATION DOC.#P98000082890

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

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONEL) CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NCTICE 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.

OKDIALL I

LUIS F. BUSTAMANTE

PRESIDENT