2001 UNIFORM BUSINESS REPORT (UBR)

(AMENDED)

FILED
01 SEP 12 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000095130

1. Entity Name
Thompson Creek Corp.

Principal Place of Business
338 Minorca Avenue
Coral Gables, Fl. 33134

Mailing Address
338 Minorca Avenue
Coral Gables, Fl 33134

2001 AMENDED UBR

2. Principal Place of Business		3. Mailing Address	
7221 NW 54th Street		7221 NW 54th Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Miami, Florida		City & State: Miami, Florida	
Zip: 33166	Country	Zip: 33166	Country

4. FEI Number: 65-0996288 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Manuel E. Cabeza, Esq.
338 Minorca Avenue
Coral Gables, Florida 33134

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so ☐ (See criteria on back)

FILE NOW!!! FEE IS $150.00 After MAY 1, 2001 Fee will be $550.00 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P/T/S Canchica, Juan Jose 5845 Collins Avenue Apt. 803 Miami, Florida 33134 ☐ Delete	☐ Change ☐ Addition 4000004614494--1 -09/27/01--01094--005 *****65.25 *****65.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	As Cabeza, Manuel E. 338 Minorca Avenue Coral Gables, Fl 33134 ☒ Delete	☐ Change ☐ Addition
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CR2E034 (11/00)

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Juan Jose Canchica, President 8/23/2001 (305)884-6899
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #