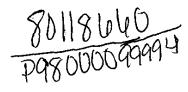
FILED May 12, 2003 8:00 am Secretary of State

\$2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) 05-12-2003 90206 019 ***150.00 DOCUMENT # P98000099994 1. Entity Name AMAIX INC. Principal Place of Business Mailing Address 3024 S.W. 113 AVENUE 3024 S.W. 113 AVENUE MIAMI, FL 33165 MIAMI, FL 33165 Principal Place of Business 3. Malling Address sam Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State 4. FE) Number Applied For 65-0877066 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 5. Name and Address of Current Registered Agent FLEITES, AIXA 3024 S.W. 113 AVENUE Street Address (P.O. Box Number Is Not Acceptable) MIAMI, FL 33165 B. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating FILE NOWN; FEE1s:\$150:00 After May 1, 2003 Fee will be \$550:00 Make Check Payable to Florida Department of State 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. CRZE034 (10/02) TITLE Delete TITLE Change Addition FLEITES, AIXA. NAMÉ NAME 3024 S.W. 113 AVENUE STREET ADDRESS STREET ANDRESS MIAMI, FL 33165 CITY-ST-ZIP CITY-ST-2P ☐ Addition TITLE Delete TITLE ☐ Change NAME FLEITES, ARMANDO NAME 3024 S.W. 113 AVENUE STREET ADDRESS STREET ADDRESS MIAMI, FL 33166 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME MALKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-21P TITLE Delete TITLE ☐ Change ■ Addition NA ME NAUF STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS ST NEET ADDRESS CITY-ST-2P COTY-ST-ZIP 1III F De lete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2P City-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 of the true empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if

PRINTED WAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment

SIGNATURE:



FLORIDA DEPARTMENT OF REVENUE ANNUAL REPORT EIN: 65-0877066 Re: AMAIX, INC.

May 7, 2003

To Whom It May Concern,

As you request me I am sending this letter explain to you the reason why I did not file the annual Report of Amaix, Inc. because I change my Residence, I never received the form required.

If you any question do not hesitate contact me to (305) 598-0991

Sincerely,

Aixa Fleites