2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 25, 2000 8:00 am Secretary of State DOCUMENT # P9900003484 1. Entity Name 6201 CORPORATION OF MIAMI 04-11-2000 90022 001 ***150.00 Principal Place of Business Mailing Address 6201 S.W. 70TH STREET 6201 S.W. 70TH STREET MIAMI FL 33143-4718 MIAMI FL 33143 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65.0902556 Not Applicable \$8.75 Additional Country Zio Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Just change the address MUNILLA, PEDRÓ R Street Address (P.O. Box Number is Not Acceptable) MUNILLA, PEURO R MIAMI FL 2005 37142 MIAMI, FL 37143 6201 S.W. 70th Street 2md .- Floor Zip Code City 33143 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 DATE Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. RALL MUNILLA DESTRUCT (DIR) 620; S.W. 70 STRUCT (DIR) MIANI FL 33143 (DIR) Addition Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUAN MUNICIA (PRES) Delete Gro(S.W., 70 STREET Addition Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 77143 CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY-ST-ZIP GOPs not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information acquirate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director axecute this report 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 supplied with this fi of the corporation or the changed, or on an enach RBUL MUNILLA

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR