2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900003530 May 16, 2000 8:00 am Secretary of State 1. Entity Name CRIBE REALTY, INC. 05-16-2000 90059 008 ***158.75 Principal Place of Business Mailing Address 7235 CORAL WAY 7235 CORAL WAY SHITE 201 SUITE 201 MIAMI FL 33155 MIAMI FL 33155-1451 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0885314 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WOJCIECHOSKI, RICHARD P Street Address (P.O. Box Number is Not Acceptable) 7235 CORAL WAY SUITE 201 MIAMI FL 33155 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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. (See criteria on back); Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PDS TITLE Change ☐ Addition TITLE Delete WOJCIECHOWSKI, RICHARD P NAME NAME STREET ADDRESS STREET ADDRESS 7235 CORAL WAY, SUITE 201 CITY-ST-ZIP CITY-ST-7IP **MIAMI FL 33155** ☐ Addition Change TITLE ☐ Delete WOJCIECHOWSKI, MARIA B NAME STREET ADDRESS 7235 CORAL WAY, SUITE 201 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **MIAMI FL 33155** ☐ Change ☐ Addition Delete TITLE WOJCIECHOWSKI, MARIA B NAME NAME 7235 CORAL WAY, SUITE 201 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33155** ☐ Addition Change TITLE TITLE ☐ Delete WOJCIECHOWSKI, CRISTIAN A NAME NAME STREET ADDRESS STREET ADDRESS 7235 CORAL WAY, SUITE 201 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33155 Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. 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 or trusted empowered to execute his 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 action of the corporation of the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the corporation of the corporation of the receiver of the corporation of the corporation

maria &, Wojciechowski SIGNATURE: SIGNATURE A