2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P9900006539 Mar 24, 2000 8:00 am Secretary of State SIGI FLOR INC. 03-24-2000 90112 008 ***150.00 Principal Place of Business Mailing Address 520 BRICKELL KEY DRIVE. SUITE 0-305 520 BRICKELL KEY DRIVE, SUITE 0-305 MIAMI FL 33131 MIAMI FL 33131-2610 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable 65-0908210 Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent STANHAM, NICHOLAS Street Address (P.O. Box Number is Not Acceptable) 520 BRICKELL KEY DRIVE, SUITE 0-305 MIAMI FL 33131 City 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, 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 \$5.00 May Be 10. Election Campaign Financing 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 OFFICERS AND DIRECTORS 12. 11, Change ☐ Addition TITLE ☐ Delete TITLE Meizler, Tony Mazal MEIZLER, TONY MAZAL NAME NAME 520 Brickell Key Drive, Suite 0-305 520 BRICKELL KEY DRIVE, SUITE 0-305 STREET ADDRESS STREET ADDRESS Miami, Fl 33131 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 D/VP XX Change ☐ Addition ☐ Delete TITLE TITLE Meizler, Abraham NAME MEIZLER, ABRAHAM NAME STREET ADDRESS 520 Brickell Key Drive, Suite 0-305 520 BRICKELL KEY DRIVE, SUITE 0-305 STREET ADDRESS CITY-ST-ZIP Miami, Fl 33131 CITY-ST-ZIP MIAMI FL 33131 Change XIX Addition ☐ Delete TITLE TITLE NAME Stanham, Nicholas NAME STREET ADDRESS \$20 Brickell Key Drive, Suite 0-305 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u> Miami, Fl 33131</u> Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Chance ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME

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(a) d 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.

STREET ADDRESS

SIGNATURE:

STREET ADDOLSS

ST-71P

Nicholas Stanha

3-20-00

(305) 374 - 3800

Daytime Phone #