2001 UNIFORM BUSINESS REPORT (UBR)

May 17, 2001 8:00 am Secretary of State DOCUMENT # P99000008574 COL-MART INTERNATIONAL SERVICES CO. 05-17-2001 91359 046 ***158.75 Principal Place of Business Mailing Address 9628 S.W. 151 AVE 9628 S.W. 151 AVE MIAMI FL 33196 MIAMI FL 33196 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0892029 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 City Zip Code FL 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 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. **PSTD** TITLE ☐ Delete TITLE ☐ Change ☐ Addition RICO, JORGE E NAME NAME 7392 NORTHWEST 35TH TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33122** ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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

er like empowered.

SIGNATURE AND TYPED OR PRINTED NAME DE SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address.

SIGNATURE

Daytime Phone #

Date

Attackment #P9900008579 767705

Hay 11, 2001

Florida Dept. of State Devision of Corporations

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Report notice was sent to 9808 sw 151 are instead of 9628 Sw 151 are. For this reason of only received blies notice today and of am sending of fee filing Fee right now.

Thank you for your kind attention.

I am requesting a Certificate of that also meludice—

Very truly yours

Sorge Rico Col-Hart International. Services Co.