To: From: Spiegel & Utrera

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2004 8:00 am
Secretary of State
04-26-2004 91014 010 ***150.00

DOCUMENT # P99000020795

1. Entity Name
MALOJERA, INC.

DO NOT WRITE IN THIS SPACE

54042391

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3850 TORREY PINES WAY Suite, Apt. #, etc.	3850 TORREY PINES WAY Suite, Apt. #, etc.
City & State: SARASOTA	City & State: SARASOTA
Zip: 34238 Country: SARASOTA	Zip: 34238 Country: SARASOTA

4. FEI Number 65-0901950

5. Certificate of Status Desired ☐ **$8.75** Addition Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Spiegel & Utrera, P.A.
1840 CORAL WAY, 4TH FLOOR
City: Miami FL Zip Code: 33145

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)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** M Added to F

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MARY L. GERRITSEN - CHRM. 3850 TORREY PINES WAY SARASOTA, FL 34238	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC'Y JEAN SACCOCCIO 3125 POST RD. SARASOTA FL 34241	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER KARAN MANCHESTER-LEAVEN 2130 PINEHURST ST SARASOTA FL 34241	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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13. I hereby 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 inform 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 dir 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 on

MARY L. GERRITSEN, CHRM. 4.2204. (941) 921.7313
Mary L. Gerritsen