2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 21, 2001 8:00 am Secretary of State DOCUMENT # P99000022077 1. Entity Name G & R TECHNOLOGY, INC. 03-21-2001 90076 024 ***150.00 Principal Place of Business Mailing Address 14301 S.W. 34TH STREET 14301 S.W. 34TH STREET MIAM! FL 33175 MIAMI FL 33175 701 B1 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied:For= City & State City & State =4.FEI Number 65-0902751 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name QUINTANA, REGINA A Street Address (P.O. Box Number is Not Acceptable) 14301 S.W. 34TH STREET **MIAMI FL 33175** 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 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 \$5.00.May.Be Election Campaign Financing Tax filling 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 OFFICERS AND DIRECTORS 11. CR2E034 (10/00) □ Addition TITLE ☐ Delete TITLE QUINTANA, REGINA A NAME NAME STREET ADDRESS 14301 S.W. 34TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33175** ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change ☐ Delete TITLE NAME NAME -STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Defete TITLE

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 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: REGINA A QUINTANA

NAME

STREET ADDRESS

CITY-ST-7IP

OUTNEANA RUNGULA
YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/15/2001 (305)207-3328

Daytime Phone #