2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000024550 May 22, 2000 8:00 am 1. Entity Name BEST COMPUTERS, U.S.A., INC Secretary of State 04-10-2000 90113 003 \*\*\*158.75 Mailing Address Principal Place of Business 887 NE 125th Street 887 NE 125th Street North Miami, FL 33161 North Miami, FL 33161 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-100 4169 Not Applicable Country Country Zip Zio \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Roberto Concepcion 887 NE 1-25th Street -Street Address (P.O.-Box-Number-is-Not-Acceptable) North Miami, FL City Zip Code FI 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 NOWILL FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filling requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. (86/6)P/D TITLE Change Addition TITLE Delete NAME Roberto Concepcion NAME CR2E034 STREET ADDRESS STREET ADDRESS 887 NE 125th Street CITY-ST-ZIP CITY-ST-ZIP North Miami, FL 33161 ☐ Addition Change TITLE TITI F NAME MARKE Roberto Concepcion STREET ADDRESS STREET ADDRESS 887 NE 125th Street CITY-ST-ZIP CITY-SY-ZIP North Miami, FL 33161 ☐ Change Addition TITLE THLE NAME NAME Melanie Concepcion STREET ADDRESS STREET ADDRESS 887 NE 125th Street CITY-ST-ZIP CITY-ST-ZIP North Miami, FL 33161 TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change
Ch TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 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. April 4, 2000 305-895-7550 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME UP SOUTH Daytime Phone #

OF BEST COMPUTERS , U.S.A. INC.