2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 07, 2000 8:00 am Secretary of State DOCUMENT # **P99000040220 C&AN INTERNATIONAL CORPORATION** 03-07-2000 90001 027 ***150.00 Mailing Address Principal Place of Business 10020 NW 41 STREET 10026 NW 41 STREET MIAMI FL 33178-2919 FL 33178 2. Principal Place of Business 3. Mailing Address N.W 2224 NW. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 33122 45-0925480 Not Applicable MIAMI Country \$8.75 Additional 5. Certificate of Status Desired SA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORDELL, BEATRIZ Street Address (P.O. Box Number is Not Acceptable 10028 NW 41 STREET **MIAMI FL 33178** Zip Code 33/22 City 8. The above named enlity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Z (NOTE. Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be 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 11. CR2E034 (9/99) Change ☐ Addition ☐ Delete TITI E TITLE ARANGO, LUIS FERNANDO NAME NAME -10028 NW 41 STREET 4660 N.W. 97 CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL-33178 CITY-ST-ZIP DS Change ☐ Addition TITLE X Delete CUARTAS, ANA ISABEL NAME 10028 NW 41 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33178** DS ☐ Change Addition ☐ Delete TITLE TITLE BOTERO WILLIAM NAME NAME 13280 S.W. 42 ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 33330 ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE □ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P Iffing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ed to execute this repair as Equired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if I hereby certify that the information supplied with this

indicated on this report or supplemental report is true of the corporation or the receiver or truetee emporer

changed, or on an attachment wi

SIGNATURE: X