2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: Y

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # P99000052589 Feb 01, 2000 8:00 am **Secretary of State** ZUNIGA'S IMPORT & EXPORT CORPORATION 02-01-2000 90045 049 ***150.00 Principal Place of Business Mailing Address 7022 SOUTHWEST 103RD PLACE 7022 SOUTHWEST 103RD PLACE MIAMI FL 33173-1324 MIAMI FL 33173 2. Principal Place of Business 3. Mailing Address SAME AS ABOVE 5 ame AS ABOVE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0936219 Not Applicable \$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 Street Address P.O. Box Number is Not Acceptable) SPIEGEL & UTRERA, P.A. S.w. 103 Place 343 ALMERIA AVENUE CORAL GABLES FL 33434 City Miami statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named per (-26-00 SIGNATURE ted 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 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. 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. 11. ☐ Change Addition **PSD** ☐ Delete TITLE TITLE CARRILLO, JORGE H NAME NAME STREET ADDRESS STREET ADDRESS 7022 SOUTHWEST 103RD PLACE CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33173** TITLE Change Addition ☐ Delete TITLE DE ZUNIGA, MARY C NAME NAME STREET ADDRESS 7022 SOUTHWEST 103RD PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAM! FL 33173 --- --☐ Detete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP olied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information apport 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 tee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with indicated on this report or supplen of the corporation or the received changed, or on an attach rith all other like empowered Jorge H Zumiga Garrillo 1

Daytime Phone #