2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2001 8:00 am
Secretary of State
04-24-2001 90033 036 ***150.00

DOCUMENT # P99000060569

1. Entity Name
TECPAR TECHNOLOGY INVESTMENT PARTNERS, INC.

Principal Place of Business	Mailing Address
520 Brickell Key Dr. Ste O-305 Miami, FL 33131	520 Brickell Key Dr.Ste O-305 Miami, FL 33131

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
340 Sevilla Ave.	340 SEvilla Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Coral Gables, FL	City & State: Coral Gables, FL
Zip: 33134 — Country: US	Zip: 33134 — Country: US

4. FEI Number 65-0937755 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Sanchez de Varona, Raul J.
145 Madeira Avenue, Suite 310
Coral Gables, FL 33134

7. Name and Address of New Registered Agent

Name: Frank Costello
Street Address (P.O. Box Number is Not Acceptable): 340 Sevilla Ave.
City: Coral Gables, FL — Zip Code: 33134

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]
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating. DATE

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

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Miguel Timponi 80 SW 8 Street Suite 2000 Miami, FL 33130 XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Frank Costello 340 Sevilla Ave. Coral Gables, FL 33134 ☐ Change XX Addition
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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 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.

x [signature] x Francis Costello x Director - V.P. x 4-09-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR