FILED 2000 UNIFORM BUSINESS REPORT (UBR) May 16, 2000 8:00 am Secretary of State **DOCUMENT #** P9900063975 E & G INVESTMENT CORP 05-16-2000 90001 010 ***150.00 Principal Place of Business Mailing Address 222 EAST 41ST STREET P O BOX 22651 i. HIALEAH, FL 33013 HIALEAH, FL不為美國子學學院 网络艾尔 经外价的现代分别的 不断人 C0090738 3. Máiling Address 2. Principal Place of Business 222 FASSTAIST Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0984421 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name NELSON ENRIQUEZ 222 EAST 41ST STREET Street Address (P.O. Box Number is Not Acceptable) HIALEAH, FL Zip Code City ts this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entit 04/26/2000 34GNATURE 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 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. 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 (9/99) Change Addition TITLE P/T ☐ Delete NAME NAME NEESON ENRIQUEZ STREET ADDRESS STREET ADDRESS 222 E. 41st.St. CITY-ST-ZIP CITY-ST-ZIP Hialeah, Fl 33013 ☐ Delete ☐ Change Addition TITLE /P/S NAME NAME RAUDEL GONZALEZ STREET ADDRESS STREET ADDRESS 721 E. 15th Place CITY-ST-ZIP CITY-ST-ZIP <u> Hialeah, Fl</u> 33010 ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 distee 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 will an address, with all other like empowered.

SIGNATURE:

NELSON ENRIQUEZ 4-26-00 305-825-01609