... 16 16 20 10 100 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 02 JUL -3 PM 1: 26 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000065476 FSD Group Inc. Principal Place of Business Mailing Address 3. Mailing Address 2. Principal Place of Business 9615 NW 80 Avenue 21 9615 NW 80 Avenue 26 Suite, Apt. #, etc. Suite, Apr. #, ctc. 4. PEI Number Applied For City & State City & State 27 65-0937274 Not Applicable 23 Hislesh Gardens PL Hialeah Gardens, FL Zip \$8.75 Additional Zip 28 5. Certificate of Status Desired Miami-Dade Pec Required 24 33016 25 Miami-Dade 33016 7. Name and Address of New Registered Ages 6. Name and Address of Correct Registered Agest Street Address (P.O. Box Number is Not Acceptable) Jorge Sucz 812 9615 NW 80 Avenue Hialeah Gardens, FL 33 83 FL for the purpose of changing its registered agent, or both, in the State of Florids 8. The shove named Signesser of a pennes name of accioused to This componention is eligible to usually its intangible Tax filing requirements and elects to do so (See criteria on back) SIGNATURE od spent and title of applicable. (NOTE: Registered After MAY 1, 2000 Fee will be \$550,00 (NOTE: Registered Agent signature required when minutaing) \$5.00 May be Election Campaign Financing Trust **Pand Contribution** Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS TITLE DELETE LI TITLE Change Addition Podro Justo Saez 1.2 NAME NAME 2520 SW 115 Avenue 1.3 STREET ADDRESS STREET ADDRESS Mismi, FL 33165 1.4 CITY-ST-2IP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TYPE IS NAME Coornelo Suez 2.2 NAME 700006101577--5 2520 SW 115 Avenue Miami, Pl. 33165 2.3 STREET ADDRESS STREET ADDRESS 14 CITY-ST-24P CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TTTLE Pedro Justo ama 2520 SW 115 Avent dro Justo Sazz NAME **3.2 NAME** STREET ADDRESS 3.3 STREET ADDRESS Minmi, FL 33165 3.4 CTTY-ST-ZIP CITY-ST-ZZP Change Addition □ DELETE ALTITUE TITLE sto Silva NAME 47 NAME 9615 NW 80 Avenue Historic Oardens, FL 33016 STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CTTY-ST-ZIP DELETE Change Addition TITLE SITIME NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADORESS CTTY-5T-ZZP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZE 6.4 CITY-ST-ZIP 13. I do hereby certify that the information ied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that port or supplemental amoust not quantry for the exchaption stated in Section 119.07(3)(1), Plorida Sittistes. I further certify that port is supplemental amoust report is true and accurate and that my signature shall have the same legal effect as if made under consortation or fine receiver or trustee empowered to execute this report as required by Chapter 607, Florida Sittistes, and that or on attaching the pith an address.

305 - 82 | -4766 | the information indicated on this annual aport oath; that I am an officer or director of the cor

CONTICKS OR DURECTOR

my name appears in Block 11 or Block 15

SIGNATURE AND TYPED OF P

TED NAME

SIGNATURE.

FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302 PHONE: (850) 668-4318 FAX: (850) 668-3398

DATE: 6-28-02

NAME: FSD GROUP, INC..

TYPE OF FILING: UBR-UPDAT

COST: A

RETURN:

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE