2000 UNIFORM BUSINESS REPORT (UBR) FILED May 16, 2000 8:00 am Secretary of State DOCUMENT # P99000069146 1. Entity Name BELTRAN INVESTMENTS, INC. 05-16-2000 90168 022 ***150.00 Principal Place of Business Mailing Address 12810 S.W. 67TH TERRACE 12810 S.W. 67TH TERRACE MIAMI FL 33183 MIAMI FL 33183-1336 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 65-0938289 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BELTRAN, BARBARA V Street Address (P.O. Box Number is Not Acceptable) 12810 S.W. 67TH TERRACE **MIAMI FL 33183** Zip Code City 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, typed or printed name of registered agent and title if applicable DATE (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 11. OFFICERS AND DIRECTORS Delete TITLE TITLE BELTRAN, ERNESTO A NAME NAME STREET ADDRESS 12810 S.W. 67TH TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33183 ☐ Chanoe **VPD** ☐ Addition TITLE ☐ Delete TITLE BELTRAN, ALFREDO NAME NAME STREET ADDRESS STREET ADDRESS 14741 S.W. 173RD STREET CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33187 ☐ Delete TITLE ☐ Change ☐ Addition TITLE BELTRAN, BARBARA V NAME 12810 S.W. 67TH TERRACE STREET ADDRESS STREET ADDRESS

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.

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