2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT#** SOUTHERN Mixmi Holding, INC P.O. Bux 997142 Migmi Florda 33 297 Principal Place of Business P.O.BOX 99714Z . P.O. BOX 997142 MIAMI Fl. 33297 Miami Florda 33295 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number Not Applicable Country \$8.75 Additional Zin. Country : 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent: Luis AUGUSTO PAIANI 3600 South STATE ROAD 7 Suite 233 Hollywood, FL. 33023 Street Address (P.O. Box Number is Not Acceptable) Zip Code FL 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. (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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 . Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. DLUIS AUGUSTO PAINNI Change Addition TITLE ☐ Delete TITLE P.O. BOX 997142 NAME NAME 600003496606---STREET ADDRESS STREET ADDRESS -12/12/00--01030--006 MIAMI 76 33299 CITY-ST-ZIP CITY-ST-ZIP ****150.00 ****150.00 TITLE ☐ Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY=STFZIP > Change Addition Oelete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change Addition Celete MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Addition П Слагов ☐ Delete TITLE NAME MAME STREET ADDRESS STREET ADDRESS C:17:-57-21P 0174-81-218 Change ☐ Addition TITLE ☐ Defete TITLE TAME KΕ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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. TE PAIRTE PAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: Dayling Etics s

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October 30, 2000

State of Florida
Division of Corporations
PO BOX 6327
Tallahassee Florida 32314

Dear Sir or Madam:

This letter will acknowledge that the corporation Southern Miami Holdings, Inc did not receive any notices of the corporate annual fee due. Therefore, I am requesting as president of the corporation, Luis Augusto Paiani to reinstate the corporation effective this date.

I am enclosing a money order in the amount of \$150.00. Thank you for your cooperation in the above matter.

Luis Paiani, President

Southern Miami Holdings, Inc

PO BOX 997142

Miami, Florida 33299

Certified mail