FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91525 014 ***150.00

DOCUMENT # P99000076067

1. Entity Name
AMAZON LUMBER CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
17801 NORTH BAY ROAD	17801 NORTH BAY ROAD
Suite, Apt. #, etc. #502	Suite, Apt. #, etc. #502
City & State SUNNY ISLES BEACH	City & State SUNNY ISLES BEACH
Zip 33160 Country USA	Zip 33160-1907 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0952314 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name CARLOS E. PINTO

Street Address (P.O. Box Number is Not Acceptable) 17801 NORTH BAY ROAD APT # 502

City SUNNY ISLES BEACH FL Zip Code 33160

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] 03-31-03
Signature of new 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) ☐

January 1 - May 1 Fee Is $150.00
After May 1, Fee Is $550.00
Amended UBR Is $61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	GENERAL MANAGER	TITLE	
NAME	CARLOS EDUARDO PINTO	NAME	
STREET ADDRESS	17801 NORTH BAY ROAD APT # 502	STREET ADDRESS	
CITY-ST-ZIP	SUNNY ISLES BEACH FL 33160	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] CARLOS E. PINTO 03-31-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone Number