FILED 🐃 2001 UNIFORM BUSIN SS REPORT (UBR) Jun 26, 2001 8:00 am DOCUMENT # P99000089959 Secretary of State 05-02-2001 90080 050 ***150 00 **FUTURA 2000 INDUSTRIES, CORP.** Principal Place of Susiness Mailing Address 10000 NW 27TH STREET 40000 10W 27TH STREET MAMI FL 33172 MIAMI-PL 33172 2. Principal Place of Business 3. Mailing Address フェック・シン・ 16 ST. 5. W. 16 ST. 7500 Suite, Apt. #, etc. Suite. Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0953708 MinHi Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 33155 J.S.A Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LAGE, GONZALO R-Street Address (P.O. Box Number is Not Acceptable) 10860 NW 27TH STREET MIAM) FL 33172 City Zip Code 8. The above name ts this statement for the pyroose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE (NOTE; Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150,00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Atter MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE ☐ Delete TITLE ☐ Change LAGE, GONZALO NAME NAME STREET ADDRESS 10860 NW 27TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33172 CITY-ST-7IP MΠF ☐ Delete TITLE Addition ☐ Change LAGE, ELĀNA NAME 10860 NW 27TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 **VP** TITLE Delate TITLE ☐ Change ■ Addition LAGE, ANGELIÑA NAME NAME STREET ADDRESS 10860 NW 27TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 TITLE ☐ Delete TITLE ☐ Change noitibba 🔲 LAGE, GONZALO M NAME NAME STREET ADDRESS 10860 NW 27TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 TITLE ☐ Delete TITLE Addition ☐ Chance NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ■ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 eath; 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.

DIRECHA PRESIDENT

SIGNATURE:

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