FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State
05-14-2002 90358 018 ***150.00

DOCUMENT # P99000095858

1. Entity Name
Betis USA INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3501 W. Vine ST	3501 W. Vine ST
Suite, Apt. #, etc. 326	Suite, Apt. #, etc. 326
City & State Kissimmee FL	City & State Kissimmee FL
Zip 34741 Country Osceola	Zip 34741 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3610744 ☐ 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 ALEXANDER BERMUDEZ.

Street Address (P.O. Box Numbers Are Not Acceptable) 1603 COLUMBIA ARM CIR 111

City Kissimmee FL Zip Code 34741.

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing)

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 NAME STREET ADDRESS CITY-ST-ZIP	President ALEXANDER BERMUDEZ 1603 COLUMBIA ARM CIR 111 Kissimmee FL 34741.
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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: Alexander Bermudez 4/23/02 President.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #