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FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 10, 2002 8:00 am
Secretary of State
05-21-2002 90875 024 ***150.00

DOCUMENT # S19269

1. Entity Name

BICHI CORPORATION

DO NOT WRITE IN THIS SPACE

92272

2. Principal Place of Business	3. Mailing Address
1915 BRICKELL AVE	1915 BRICKELL AVE.
Suite, Apt. #, etc.: C-402	Suite, Apt. #, etc.: C-402
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33129-1709 Country:	Zip: 33129-1709 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0335324 ☐ 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: WISNIACKI, FABIAN

Street Address (P.O. Box Number is Not Acceptable): 1915 BRICKELL AVE. #C-402

City: MIAMI FL Zip Code: 33129

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 X

Signature, typed or printed name of 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	PD
NAME	WISNIACKI, BENJAMIN
STREET ADDRESS	1915 BRICKELL AVE. #C-402
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	VSD
NAME	SPITERI, ANA STELMA
STREET ADDRESS	1915 BRICKELL AVE. #C-402
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	D
NAME	WISNIACKI DE BLOCH, M.
STREET ADDRESS	1915 BRICKELL AVE. #C-402
CITY-ST-ZIP	MIAMI, FL. 33129
TITLE	D
NAME	WISNIACKI, SALOMON G.
STREET ADDRESS	1915 BRICKELL AVE. #C-402
CITY-ST-ZIP	MIAMI, FL. 33129
TITLE	D
NAME	WISNIACKI DE BERMAN, G.R.
STREET ADDRESS	1915 BRICKELL AVE. #C-402
CITY-ST-ZIP	MIAMI, FL. 33129
TITLE	DVT
NAME	WISNIACKI, FABIAN
STREET ADDRESS	1915 BRICKELL AVE. #C-402
CITY-ST-ZIP	MIAMI FL 33129

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DO NOT WRITE IN THIS SPACE

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FABIAN WISNIACKI, VP 305-377-2916

Date 04/26/02 Daytime Phone #