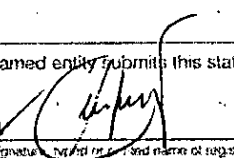
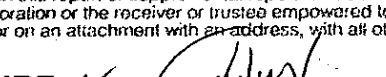


FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90627 041 ***158.75

DOCUMENT # s80781 1. Entity Name DEMAR EXPORT, INC.				May 22, 2001 8:00 am Secretary of State 05-22-2001 90627 041 ***158.75							
Principal Place of Business 9601 COLLINS AVE UNIT T-1 BAL HARBOUR FL 33154				Mailing Address 9601 COLLINS AVE UNIT T-1 BAL HARBOUR FL 33154							
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.							
City & State				4. FEI Number NOT APPLICABLE ☒ Applied For Not Applicable ☒							
Zip		Country		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required							
6. Name and Address of Current Registered Agent SCINTO, LEONARDO 9601 COLLINS AVE UNIT T-1 BAL HARBOUR FL 33154				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code							
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 of the registered agent and name of registered agent and title if applicable.				LEONARDO A SCINTO (NOTE: Registered Agent signature required when reinstating)							
9. This corporation is eligible to satisfy its Intangible Tax (filing requirement and elects to do so. (See criteria on back)) ☐				FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State							
10. Election Campaign Financing.. ☐ \$5.00 May Be Added to Fees											
11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11							
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition	
	DPST	SCINTO, LEONARDO A	9601 COLLINS AVE UNIT T-1 BAL HARBOUR FL 33154								
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 Block 12 if changed, or on an attachment with an address, with all other like empowered.											
SIGNATURE: 				LEONARDO A SCINTO				PRESIDENT 4/25TH/2001			