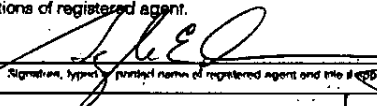


2-24-2004 2:08PM

FROM URYC CORP/MEXIFROST 305 557

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Mar 16, 2004 8:00 am
Secretary of State

03-16-2004 90018 008 ***150.00

DOCUMENT # S84996 1. Entity Name URYC CORPORATION					
Principal Place of Business 2360 WEST 78 ST HIALEAH, FL 33016 US			Mailing Address 2360 WEST 78 ST HIALEAH, FL 33016 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P O Box 160487 Suite, Apt. #, etc.			
City & State Zip		City & State HIALEAH, FL Zip 33016		4. FEI Number 65-0310462	
Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RUIZ, LESMES 2360 WEST 78 ST HIALEAH, FL 33-0167			7. Name and Address of New Registered Agent Name GONZALO E. ARHENDARIZ Street Address (P.O. Box Number is Not Acceptable) 7831 W 26 AVE P.O. Box 160487 City HIALEAH FL Zip Code 33016		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  GONZALO E. ARHENDARIZ 3/11/04 (Signature, typed or printed name of registered agent and this is acceptable. (NOTE: Registered Agent signature required when reinstating.) DATE)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS RUIZ, LESMES 2318 WEST 78TH STREET HIALEAH, FL 33018 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS ARHENDARIZ, GONZALO E. 7831 W 26 AVE, HIALEAH FL 33016 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD URIBE, ALBERTO 2318 WEST 78TH STREET HIALEAH, FL 33018 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISAIAS, ROBERTO 2600 Douglas Rd, Ste 1004 Coral Gables, FL 33134 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D URIBE, YVONNE 2318 WEST 78TH STREET HIALEAH, FL 33018 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALBARRAN, MANUEL 2318 WEST 78TH STREET HIALEAH, FL 33018 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FUENTES, ALEJANDRO C 2318 WEST 78TH STREET HIALEAH, FL 33016 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Feb 24, 04 9173611617 Date Daytime Phone #			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					