2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 20, 2001 08:00 AM DOCUMENT # S95951 1. Entity Name **Secretary of State** M & F PREMIUM FINANCE COMPANY Principal Place of Business Mailing Address 3401 N.W. 82 AVENUE 3401 N.W. 82 AVENUE SUITE 100 SUITE 100 MIAMI FLMIAMI FL 33122 33122 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0311832 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FERNANDEZ-SILVA, JORGE FERNANDEZ-SILVA JORGE 3401 NW 82 AVENUE Street Address (P.O. Box Number is Not Acceptable) 3401 NW 82 AVENUE SUITE 100 MIAMI FLSUITE 100 33122 City Zip Code MIAMI 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. JORGE FERNANDEZ-SILVA 04/20/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 FILE NOW!!! FEE 15 \$130.00 _______After MAY 1, 2001 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 VT TITLE CR2E034 (11/00) ☐ Delete TITLE X Change ☐ Addition FREVRE ERNESTO MAME ERNESTO NAME FREYRE 9040 SW 78TH COURT STREET ADDRESS 9040 SW 78TH COURT STREET ADDRESS CITY-ST-ZIP MIAMI \mathbf{FL} CITY-ST-ZIP DEVS ☐ Delete TITLE ☐ Change NAME FREYRE PEDRO NAME STREET ADDRESS 8541 SW 72ND TERR STREET ADDRESS CITY-ST-ZIP MIAMI \mathbf{FL} CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition FERNANDEZ-SILVA JORGE NAME STREET ADDRESS 8041 SW 54 CT STREET ADDRESS CITY-ST-ZIP MIAMI FLCITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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: _ Pedro A. Freyre 04/20/2001

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR