2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # V19635** May 30, 2000 8:00 am Secretary of State FERGO IMPORT & EXPORT, INC. 05-30-2000 90022 043 ***150.00 Mailing Address Principal Place of Business 17344 SW 7 ST. PEM PINES 17344 SW T ST. PEM. PINES PEMBROKE PINES FL 33029 PEMBROKE PINES FL 33029 2. Principal Place of Business Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0319875 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Nāme FERNANDEZ, HUMBERTO Street Address (P.O. Box Number is Not Acceptable) 17344 SW 7 ST PEMBROKE PINES FL 33029 Zip Code City submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity SIGNATU FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition Defete TITLE TITLE NAME NAME FERNANDEZ, HUMBERTO STREET ADDRESS STREET ADDRESS 17344 SW 7 ST CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FI ☐ Change ☐ Addition TITLE Delete NAME NAME FERNANDEZ, SYLVIA STREET ADDRESS STREET ADDRESS 17344 SW 7 ST. CITY-ST-7IP CITY-ST-ZIP PEMBROKE PINES FI -Addition TITLE TITLE ERUNANUM ADOCTO NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Defete TITLE NAME 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 in changed, or on an attachment with an address, with all other like empowered.

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