2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # V38098** May 02, 2000 8:00 am Secretary of State 1. Entity Name HAMILTON INVESTMENTS, INC. 05-02-2000 90101 037 ***150.00 Principal Place of Business Mailing Address 3915 BISCAYNE BLVD 3915 BISCAYNE BLVD MIAMI FL 33137-3779 MIAMI FL 33137 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For 4. FEi Number City & State 65-0333519 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JUNGER, GUY ESQ Street Address (P.O. Box Number is Not Acceptable) 3915 BISCAYNE BLVD. **MIAMI FL 33137** 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Added to Fees Trust Fund Contribution. (See criteria on back) П Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. DCP Change ☐ Addition ☐ Delete TITLE TITLE ESPIN, ROBERTO NAME NAME 3915 BISCAYNE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI FL CITY-ST-7IP [] Change ☐ Addition Delete TITLE TITLE CUADRA, ENRIQUE NAME STREET ADDRESS 3915 BISCAYNE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAM! FL 33137 ☐ Change ☐ Addition Delete TITLE TITLE LUIS. ALVAREZ NAME NAME STREET ADDRESS 3915 BISCAYNE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33137 Change ☐ Addition TDSV ☐ Delete TITLE TITLE LOPEZ, JUAN NAME NAME STREET ADDRESS 3915 BISCAYNE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33137** ☐ Change ☐ Addition ☐ Defete TITLE JACKSON, SHAUN NAME STREET ADDRESS 3915 BISCAYNE BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33137** Addition ☐ Change D ☐ Delete TITLE STAR, WILLIAM NAME 3915 BISCAYNE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33137** 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 reports 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 exployered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE: