2000 UNIFORM BUSINESS REPORT (UBR) FILED Feb 21, 2000 8:00 am DOCUMENT # **G28247** 1. Entity Name Secretary of State ROTHEL, INC. 02-21-2000 90042 008 ***150.00 Principal Place of Business Mailing Address 508 BUENDIA AVE EXT. 508 BUENDIA AVE EXT. NORTH FORBES PARK NORTH FORBES PARK MAKATI METRO MANILA. PHILIPP MAKATI METRO MANILA, PHILIPP 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 34-1011561 Not Applicable Zip Zip Country \$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 Name FUCHS, LAWRENCE M. ESQ. Street Address (P.O. Box Number is Not Acceptable) 590 ROYAL PALM BCH BLVD ROYAL PALM BCH: FL 33411 Zip Code FL 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, 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 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 OFFICERS AND DIRECTORS 11. 12. Addition Change TITLE Delete VILLONCO, ROMEO S. NAME STREET ADDRESS GALIANO ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ROYAL PALM BCH. FL Delete ☐ Addition TITLE ☐ Change TITLE LAZATIN, DELZA NAME NAME GALIANO ST. STREET ADDRESS STREET ADDRESS ROYAL PALM BEACH FL CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE ☐ Delete TITLE MABANTA, THELMA V NAME NAME GALIANO ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ROYAL PALM BEACH FL CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with this filly indicated on this report or supplemental report is true of the corporation or the receiver profistee empowere changed, or on an attachment all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

SIGNATURE:∠

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

ROMEONS VILLONO President NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

February 8,2000

Addition

☐ Change