

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 469076

1. Entity Name

ARROYO INVESTMENTS, INC.

**FILED**  
**Apr 26, 2000 8:00 am**  
**Secretary of State**

04-26-2000 90046 007 \*\*\*150.00

Principal Place of Business

1121 CRANDON BLVD.  
STE. E-402  
KEY BISCAYNE FL 33149

Mailing Address

1121 CRANDON BLVD.  
STE. E-402  
KEY BISCAYNE FL 33149-2788

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

90 JOSEPH M. FILLOY CPA  
100 N. BISCAYNE BLVD  
MIAMI FL  
33132 U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1657838

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ERWIN, CHESTER D  
405 WESTCHESTER DRIVE  
DELAND FL 32724

Name

JOSEPH M. FILLOY CPA

Street Address (P.O. Box Number is Not Acceptable)

100 N. BISCAYNE BLVD, SUITE 700  
MIAMI FL

City

FL

Zip Code

33132

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)

DATE

JOSEPH M. FILLOY

4/20/00

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$350.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME BOUSHEHRI, MEHDI  
STREET ADDRESS 1121 CRANDON BLVD.E-402  
CITY-ST-ZIP KEY BISCAYNE FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VSTD ☐ Delete  
NAME PORCHER, JACQUELINE  
STREET ADDRESS 1121 CRANDON BLVD.E-402  
CITY-ST-ZIP KEY BISCAYNE FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)