

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90104 004 \*\*\*150.00

**DOCUMENT # L96217**

1. Entity Name

**LTC INVESTMENTS, INC.**

Principal Place of Business

2531 N.W. 72ND AVENUE, SUITE B  
 MIAMI FL 33122

Mailing Address

9261 SW 11TH STREET  
 MIAMI FL 33174-3102  
 US

2. Principal Place of Business

8500 S.W. 8th St.  
 Suite, Apt. #, etc.  
 Suite # 246

3. Mailing Address

4444 S.W. 71st Ave  
 Suite, Apt. #, etc.  
 Suite # 107

City & State  
 Miami, Fl.

City & State  
 Miami, Fl.

4. FEI Number

**65-0225938**

Applied For

Not Applicable

Zip  
 33144

Country  
 Miami-Dade

Zip  
 33155

Country  
 Miami-Dade

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

IGLESIAS, JOSE A.  
 9261 S.W. 11TH ST.  
 MIAMI FL 33174

7. Name and Address of New Registered Agent

Name **ROLANDO IGLESIAS**

Street Address (P.O. Box Number is Not Acceptable)  
 4444 S.W. 71st Ave.

Suite # 107

City **Miami**

**FL**

Zip Code **33155**

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

*Rolando Iglesias*  
 Signature typed or printed name of registered agent and title if applicable  
**ROLANDO IGLESIAS**

(NOTE: Registered Agent signature required when reinstating)

**04/28/00**  
 DATE

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 \$550.00**  
**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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PDS</b> <b>IGLESIAS, JOSE A.</b> <b>9261 S.W. 11TH ST.</b> <b>MIAMI FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b> <b>IGLESIAS, ROLANDO</b> <b>9265 S.W. 10TH TERRACE</b> <b>MIAMI FL</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PDS</b> <b>IGLESIAS, ROLANDO</b> <b>9265 S.W. 10th Terr</b> <b>Miami, Fl. 33174</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b> <b>IGLESIAS, ELINA</b> <b>9261 S.W. 11th St.</b> <b>Miami, Fl. 33174</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

*Rolando Iglesias*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**ROLANDO IGLESIAS**

**04/28/00**  
 Date

**305-667-0470**  
 Daytime Phone #

CR20004 (9/00)