

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90345 022 ***158.75

DOCUMENT # P00000051605



1. Entity Name
SOUTH 101 INVESTMENT, INC.

Principal Place of Business
**2600 SW THIRD AVE.
#730
MIAMI FL 33129**

Mailing Address
**2742 BISCAYNE BLVD
MIAMI FL 33137**



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
**2600 SW 3rd. Avenue
730**

Suite, Apt. #, etc.
730

City & State
Miami, FL.

Zip
33129

Country
USA.

4. FEI Number
65-1010712

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**DE VARONA, RAUL SANCHEZ
145 MADERIA AVENUE
SUITE 310
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name
Guzman, Mario.
Street Address (P.O. Box Number is Not Acceptable)
**Two Dutton Center
9130 S. Dade Blvd. Suite 1504.**
City
Miami. FL Zip Code
33156

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

MARIO GUZMAN

(NOTE: Registered Agent signature required when reinstating)

3/22/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSD BARBAGALLO, MIGUEL ANGEL 2875 N.E. 191ST ST., PH 3A AVENTURA FL 33180 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD RIZZUTI, CARLOS 2875 N.E. 191ST ST., PH 3A AVENTURA FL 33180 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD BARBAGALLO, SEBASTIAN 2875 N.E. 191ST ST., PH 3A AVENTURA FL 33180 | <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 |

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2600 SW 3rd. Avenue #730 Miami, FL 33129. | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2600 Sw. 3rd. Avenue # 730 Miami, FL 33129. | |
| 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 |
| | |

12. I hereby certify that the information supplied in 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 authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, or otherwise like empowered.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/17/03

Date

(305) 833-5627

Daytime Phone #

CR2E034 (10/02)