PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000072531

2040 INVESTMENTS, INC.

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90021 016 ***150.00



			_		•
Principal Place of Business	al Ptace of Business Mailing Address			. I 1991/691 trà rai pi rain each dòin agus agus guid (1991 agus airtí mar 1891	
2040 N.E. 163RD STREET 2040 N.E. 163RD STREET NORTH MIAMI BEACH FL 33162 NORTH MIAMI BEACH FL 331		162		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	1
				08/19/1998	
2. Principal Place of Business 2a. Mailing Address			.	A FEI Number Applied For	1 :
28 2020 N.E. 1		63RD ST		65-08-58843 Not Applicable	1 !
- Suite, Apt. #, etc Suite, Apt. #, etc.				\$9.75 Additional	1 !
27 Suite 300				5. Certificate of Status Desired	! '
City & State	City & State City & State			6. Election Campaign Financing \$5.00 May Be	1
23	28 NON THE TRIAN BE		FL.	Trust Fund Contribution Added to Fees	
Zip Country	ZipCou		/ _	8. This corporation owes the current year Intangible	
24 25	29 35/4/ 30	d G	<u>-S•A··</u>	Personal Property Tax. ☑Yes ☐No	1
9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	┨ .
DOCEDO NEILO		81	Name	•	
ROGERS, NEIL S		82	82 Street Address (P.O. Box Number is Not Acceptable)		1
2040 N.E. 163RD STREET		L			1
Suite 300 North Miami Beach Fl 33162		83	' [
NORTH MIAMI BEAUTI FE 33102		84	City	85 Zip Code	1
			<u></u>	FL The second	
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation	if Florida, Such change was auth ons of, Section 607.0505, Florida	ionzed by a Statutes	the corporation	ration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered	
SIGNATURE 1 THE STATE ST	PRESIDENT			4/15/99	} _!
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Res 12. OFFICERS AND DIRECTORS		distanted Agen	nt signature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	8
THE VILE PREDET	DELETE	1,1 TITLE	<u> </u>	Change Addition	CR2E034 (11/98)
NAME GABRIEL SARRY	<u></u>	1.2 NAME			₹
STREET ADDRESS 2 11 24 NJC 2 4 Cos			TADORESS		유
arristize N. Milan Beach, ZL	P N. M.A. BEACH, ZL. 33180.		1-ZP		🛱
TITLE SECRETIFIES	CEC2 E 7 PO DELETE 21TH		,,-2	☐ Change ☐ Addition	5
NAME ACHIAZ OZ	N. HIAH, BELLH, ZL. 33180. 140 SECRETARY DELETE 21TH ACHIAZ OZ 22N				
STREET ADDRESS 20941 N.E. 21 €	23 20941 N.E. 21 COURT,		TADORESS		1
OTY-ST-ZP N. HIAMI BEACH,	7		ST-20P		
	PRESIDENT + TREASURER DELETE 21TH			☐ Change ☐ Addition	ll
'	NEL-S. ROGERS - 3274				
STREET ADDRESS 2.020 -1-6- 163 70 57			TADORESS	manufacture of the control of the co	
CITY-ST-ZP N-H. Am BEACH,			37-20P		Г
TITLE	DELETE 4.1 TT			☐ Change ☐ Addition	ł
NAME	,	4.2 NAME	ŧ		ļ
STREET ADDRESS	43 ST		TADDRESS		[
CITY-ST-ZIP	4.4 (21)		T-ZIP		ļ
TITLE	☐ DELETE	5.1 TITLE	1	☐ Change ☐ Addition	
NAME		52 NAME	İ	•	١.
STREET ADDRESS			TARRESCO I		
		5.3 STREET	l l		
CITY-ST-ZIP		5.4 CITY-S	l l		
l '	☐ DELETE	5.4 CITY-S 6.1 TITLE	l l	: Change Addition	
CITY-ST-ZIP	☐ DELETE	54 CITY-S 6.1 TITLE 6.2 NAME	т- д е	: Change Addition	}
CITY-ST-ZIP	DELETE	5.4 CITY-S 6.1 TITLE	T-ZIP TADORESS	: Change Addition	}

i. I hereby cartity that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)[i), Floride Statutes. I further certify that the information indicated on this annual report or supplemental annual 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, Floride Statutes; and that my name appears in Block 12 or Block (13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \

LATES NUMBER NAME OF SIGNING OFFICER OR DIRECTOR

4/15/99

305-935-6900.