

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 13, 2000 8:00 am**  
**Secretary of State**

04-13-2000 90025 013 \*\*\*150.00

**DOCUMENT # 504573**

1. Entity Name

**FLORIDA ATLANTIC INVESTMENTS, INC.**

Principal Place of Business

Mailing Address

**340 ROYAL POINCIANA WAY STE 316  
 PALM BEACH FL 33480**

**340 ROYAL POINCIANA WAY STE 316  
 PALM BEACH FL 33480-4096**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-1679581**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CARSON, DONALD W  
 340 ROYAL POINCIANA WAY STE 316  
 PALM BEACH FL 33480**

Name  
**Armando A. Tabernilla**

Street Address (P.O. Box Number is Not Acceptable)  
**340 Royal Poinciana Way**

**Suite 316**

City  
**Palm Beach**

**FL**

Zip Code  
**33480**

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

**Armando A. Tabernilla, VP**

**4/10/00**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>FIERRO, ALFONSO</b> <b>340 ROYAL POINCIANA WAY STE 316</b> <b>PALM BEACH FL 33480</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ARRUZA, ANTONIO</b> <b>340 ROYAL POINCIANA WAY</b> <b>PALM BEACH FL 33480</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VT</b> <b>KANAI, DENNIS J</b> <b>316 ROYAL POINCIANA PL</b> <b>PALM BCH, FL 00000 33480</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVCP</b> <b>FANJUL, JOSE</b> <b>316 ROYAL POINCIANA PL</b> <b>PALM BCH, FL 00000 33480</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSD</b> <b>CARSON, DONALD W</b> <b>316 ROYAL POINCIANA PL</b> <b>PALM BCH, FL 00000 33480</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>BAKER, DAVID H. E</b> <b>321 ROYAL POINCIANA PLAZA</b> <b>PALM BEACH FL 33480</b>	<input checked="" type="checkbox"/> Delete

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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" 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 address, with all other like empowered.

SIGNATURE:

**Signature Required**

**Armando A. Tabernilla, VP 4/10/00 561-655-6303**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

ATTACHMENT TO  
PROFIT  
2000 UNIFORM BUSINESS REPORT (UBR)

# 504573  
A 0038838

DOCUMENT # 504573 (7)

I. Corporation Name

FLORIDA ATLANTIC INVESTMENTS, INC.

13. - CONTINUED ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VT	[ ] Change [X] Addition
NAME	Blomqvist, Erik J.	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, Florida 33480	
TITLE	AS	[ ] Change [X] Addition
NAME	Busto, Jorge del	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, Florida 33480	
TITLE	D/C	[ ] Change [X] Addition
NAME	Fanjul, Alfonso	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, Florida 33480	
TITLE	V	[ ] Change [X] Addition
NAME	Fernández, Luis J.	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, Florida 33480	
TITLE	V	[ ] Change [X] Addition
NAME	Portuondo, Aurelio	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, Florida 33480	
TITLE	AS	[ ] Change [X] Addition
NAME	Ross, Daniel D., Esq.	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, Florida 33480	
TITLE	V	[ ] Change [X] Addition
NAME	Hernández, Oscar R.	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, Florida 33480	
TITLE	AS	[ ] Change [X] Addition
NAME	Tarr, William F.	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, Florida 33480	
TITLE	VS	[ ] Change [X] Addition
NAME	Tabernilla, Armando A.	
STREET ADDRESS	340 Royal Poinciana Way, Suite 316	
CITY-ST-ZIP	Palm Beach, Florida 33480	