

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S71115

1. Entity Name

HUTCHINSON ISLAND/OCEAN INVESTMENTS, INC.

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90122 012 ***150.00

Principal Place of Business	Mailing Address
601 BRICKELL KEY DRIVE 705 MIAMI FL 33131 US	601 BRICKELL KEY DRIVE 705 MIAMI FL 33131-2649 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number	65-0278222	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

DE LA PENA, VILLANUEVO & LLP
 601 BRICKELL KEY DRIVE
 SUITE 705
 MIAMI FL 33131

7. Name and Address of New Registered Agent

Name DE LA PENA & BAJANDAS, LLP.
 Street Address (P.O. Box Number is Not Acceptable)
 601 BRICKELL KEY DRIVE
 SUITE 705
 City MIAMI FL Zip Code 33131

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 LEONCIO E. DE LA PENA 04/28/00
 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

TITLE	D	☐ Delete
NAME	CASTILLO, ADDY	
STREET ADDRESS	7255 NORTH OAKMONT DRIVE	
CITY-ST-ZIP	MIAMI FL 33015	
TITLE	S	☐ Delete
NAME	LORENA, GOMEZ	
STREET ADDRESS	7255 NORTH OAKMONT RRIVE	
CITY-ST-ZIP	MIAMI FL 33015	
TITLE	AS	☐ Delete
NAME	BAJANDAS, RICARDO	
STREET ADDRESS	601 BRICKELL KEY DRIVE	
CITY-ST-ZIP	MIAMI FL 33131	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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: RICARDO BAJANDAS 04/28/00 (305) 377-0809
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)