

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**May 07, 2001 8:00 am**  
**Secretary of State**

05-07-2001 90005 015 \*\*\*150.00

**DOCUMENT # F62198**

1. Entity Name

**MAY INVESTMENTS, INC.**

Principal Place of Business

**1200 BRICKELL AVE  
STE 900  
MIAMI FL 33131  
US**

Mailing Address

**1200 BRICKELL AVE  
STE 900  
MIAMI FL 33131  
US**

2. Principal Place of Business

**200 South Biscayne Blvd**

3. Mailing Address

**200 So. Biscayne Blvd.**

Suite, Apt. #, etc.

**Suite 200**

Suite, Apt. #, etc.

**Suite 200**

City & State

**Miami, Florida**

City & State

**Miami, Florida**

Zip

Country

**33131-2310 USA**

Zip

Country

**33131-2310 USA**

6. Name and Address of Current Registered Agent

**AGIM REGISTERED AGENTS, INC.  
1200 BRICKELL AVE STE 900  
JMM  
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name

**James M. Meyer, Esq.**

Street Address (P.O. Box Number is Not Acceptable)

**Kilpatrick Stockton LLP**

**Suite 2000**

**200 South Biscayne Boulevard**

**Miami, Florida**

Zip Code

**33131-2310**

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

*James M. Meyer*

*James M. Meyer, Esq. March 1, 2001*

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, 2001 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 **PTD** ☐ Delete  
NAME **GUTIERREZ, DIONISIO**  
STREET ADDRESS **1200 BRICKELL AVE STE 900**  
CITY-ST-ZIP **MIAMI FL**

TITLE **V** ☐ Delete  
NAME **GUTIERREZ MAYORGA, ALEJANDRO**  
STREET ADDRESS **1200 BRICKELL AVE STE 900**  
CITY-ST-ZIP **MIAMI FL**

TITLE **S** ☐ Delete  
NAME **GUTIERREZ MAYORGA, JUAN JOSE**  
STREET ADDRESS **1200 BRICKELL AVE STE 900**  
CITY-ST-ZIP **MIAMI FL**

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 **PTD** ☒ Change ☐ Addition  
NAME **Gutierrez, Dionisio**  
STREET ADDRESS **200 South Biscayne Blvd., #2000**  
CITY-ST-ZIP **Miami, Florida 33131-2310**

TITLE **V** ☒ Change ☐ Addition  
NAME **Gutierrez Mayorga, Alejandro**  
STREET ADDRESS **200 South Biscayne Blvd. #2000**  
CITY-ST-ZIP **Miami, Florida 33131-2310**

TITLE **S** ☒ Change ☐ Addition  
NAME **Gutierrez Mayorga, Juan Jose**  
STREET ADDRESS **200 South Biscayne Blvd., #2000**  
CITY-ST-ZIP **Miami, Florida 33131-2310**

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 an other like empowered.

SIGNATURE: *James M. Meyer*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)