

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2003 8:00 am**  
**Secretary of State**

04-17-2003 90633 008 \*\*\*150.00

**DOCUMENT # P95000096282**

1. Entity Name  
**CEJAS HERITAGE INVESTMENTS, INC.**



Principal Place of Business  
**420 LINCOLN RD  
PENTHOUSE  
MIAMI BEACH FL 33139  
US**

Mailing Address  
**PO BOX 191768  
MIAMI FL 33119-1768  
US**



2. Principal Place of Business  
**420 Lincoln Road**

3. Mailing Address  
**Suite, Apt. #, etc.**

**Suite 443**

City & State  
**Miami Beach, FL**

City & State

4. FEI Number **65-0639853**

Applied For  
Not Applicable

Zip  
**33139**

Country  
**Dade**

Zip

Country

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

## 6. Name and Address of Current Registered Agent

## 7. Name and Address of New Registered Agent

**PLC INVESTMENTS INC  
420 LINCOLN RD, PENTHOUSE  
MIAMI BEACH FL 33139**

Name  
**PLC Investments, Inc.**  
Street Address (P.O. Box Number is Not Acceptable)  
**420 Lincoln Road**  
**Suite 443**  
City  
**Miami Beach** **FL** Zip Code  
**33139**

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

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

(NOTE: Registered Agent signature required when reinstating)

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VPDT  
CEJAS, PABLO L  
420 LINCOLN RD, PENTHOUSE  
MIAMI BEACH FL 33139** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
MONTERO, HILDA C  
420 LINCOLN RD, PENTHOUSE  
MIAMI BEACH FL 33139** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**420 Lincoln Road, Suite 443  
Miami Beach, FL 33139** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
CEJAS, PAUL L  
420 LINCOLN RD, PENTHOUSE  
MIAMI BEACH FL 33139** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**420 Lincoln Road, Suite 443  
Miami Beach, FL 33139** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
PELLEGRINI, NINA  
1430 AUDUBON AVE.  
MONTARA CA 94037** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Director  
Gertie Cejas  
420 Lincoln Road, Suite 443  
Miami Beach, FL 33139** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *[Signature]*  
Signature and typed or printed name of signing officer or director  
**Hilda C. Montero, Secretary**

**4/15/03**  
Date

**305-531-5220**  
Daytime Phone #

CR2E034 (10/02)