

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90416 014 \*\*\*158.75

**DOCUMENT # 478372**

1. Entity Name  
**CANTELOP PROPERTY INVESTMENT, INC.**



**40089413**



Principal Place of Business  
**2300 CORAL WAY  
SUITE 200  
MIAMI, FL 33145**

Mailing Address  
**2300 CORAL WAY  
SUITE 200  
MIAMI, FL 33145**

2. Principal Place of Business - No P.O. Box #  
Suite, Apt. #, etc.

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

01242007 Chg-P CR2E034 (12/06)

City & State  
Zip Country

4. FEI Number  
**65-0265658**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**FLORIDA ANNUAL REPORT SERVICES, INC.  
2300 CORAL WAY  
SUITE 200  
MIAMI, FL 33145**

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

T  
NAME **CANTERA LOPEZ, AMADA** ☐ Delete  
STREET ADDRESS **2300 CORAL WAY SUITE 200**  
CITY-ST-ZIP **MIAMI, FL 33145**

S  
NAME **LOPEZ-CANTERA, AMADA** ☐ Delete  
STREET ADDRESS **2300 CORAL WAY SUITE 200**  
CITY-ST-ZIP **MIAMI, FL 33145**

PV  
NAME **LOPEZ-CANTERA, CARLOS C** ☐ Delete  
STREET ADDRESS **150 ALHAMBRA CIRCLE, SUITE 925**  
CITY-ST-ZIP **CORAL GABLES, FL 33134**

☐ Delete

☐ Delete

☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 the address, with authority to be so empowered.

SIGNATURE: **carlos Lopez-Cantera** 4/30/07 (305)461-0563  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #