

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State
 05-07-2002 90213 039 ***150.00

DOCUMENT # 833125

1. Entity Name
BALA INVESTMENTS N.V.

Principal Place of Business
C/O CORPORATION COMPANY OF MIAMI
100 CHOPIN PLAZA, 15TH FLOOR
MIAMI FL 33131-4332

Mailing Address
9095 SW 87 AVE
777
MIAMI FL 33136



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1555612**

Applied For
 Not Applicable

Zip

Country

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

CORPORATION COMPANY OF MIAMI
100 CHOPIN PLAZA, 15TH FLOOR
MIAMI FL 33131

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.

SIGNATURE

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, 2002 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	PD	☐ Delete
NAME	YOHOROS, MOISES	
STREET ADDRESS	% 201 S BISCAYNE 16TH FL	
CITY-ST-ZIP	MIAMI FL	
TITLE	STD	☐ Delete
NAME	YOHOROS, DAVID M.	
STREET ADDRESS	% 201 S BISCAYNE 16TH FL	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☒ Delete
NAME	YOHOROS, RICHARD M.	
STREET ADDRESS	% 201 S BISCAYNE 16TH FL	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ Delete
NAME	BEHEERSKANTOR, LEX	
STREET ADDRESS	PIETERMAAI 23	
CITY-ST-ZIP	CURACAO, NETH, ANTIL	
TITLE	AS	☒ Delete
NAME	SHERMAN, LILLIAN	
STREET ADDRESS	4155 SW 67TH AVE, #101-B	
CITY-ST-ZIP	DAVIE FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T/D	☐ Change ☒ Addition
NAME	Covenant Managers N.V.	
STREET ADDRESS	100 Chopin Plaza 16 Floor	
CITY-ST-ZIP	Miami FL 33131	
TITLE	D	☐ Change ☒ Addition
NAME	Gay Alegre Y. Dayan	
STREET ADDRESS	100 Chopin Plaza 16 Floor	
CITY-ST-ZIP	Miami FL 33131	
TITLE	VID	☐ Change ☒ Addition
NAME	Camelia Hamoui de Yohoros	
STREET ADDRESS	100 Chopin Plaza 16 Floor	
CITY-ST-ZIP	Miami FL 33131	
TITLE	S/D	☐ Change ☒ Addition
NAME	Roger M. Ari Yohoros	
STREET ADDRESS	100 Chopin Plaza 16 Floor	
CITY-ST-ZIP	Miami FL 33131	

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:

Moises Yohoros
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02 305-220-0870
 Date Daytime Phone #

CR2E034 (9/01)