

2001 UNIFORM BUSINESS REPORT (UBR)

0002124 AF

DOCUMENT # **A26047**

1. Entity Name

MEGA PROPERTY INVESTMENTS, LTD.

FILED

01 MAY -2 PM 12:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
~~620 FERGUSON DRIVE~~ 1611A Alden Road P.O. BOX 1193
~~ORLANDO FL 32805~~ Orlando, FL 32803 ORLANDO FL 32802-1193

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3131146**

Applied For
Not Applicable

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

~~HANG, KAMAL~~ VteA Gonsalves
~~620 FERGUSON DRIVE~~ 1611A Alden Road
~~ORLANDO FL 32805~~ Orlando, FL 32803

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.

(NOT Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record. **\$2,959,308.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **S13417**
NAME **IVORY INVESTMENTS, INC.**
STREET ADDRESS ~~845 N. GARLAND AVENUE~~ 1611A Alden Road
CITY-ST-ZIP **ORLANDO FL 32803**

STREET ADDRESS
CITY-ST-ZIP **200004301802--5**
~~05/23/01 01040 002~~
******526.25 ****526.25**

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14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)