FILED

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F43047**

1. Corporation Name

GREENWICH INVESTMENTS, INC.) 1007100 (111 P:000 1111 A0111 61	hi (88) 6 1 6 14 81		1 8(8): 8:8: 1 (88)
Principal Plac	ce of Business	Mailing Address				-	I I I I I I I I I I I I I I I I I I I		I DIBII DIBII IDBI
C/O MENDOZA. ALLAS & SCHIŁLING 251 ROYAL PALM WAY PALM BEACH FL 33480 . PALM BCH FL 33480						DO NOT WRI	TE IN THIS	SPACE	
US						3. Date Incorporated or Qualifed			
						08/31/1981			
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		I A	opplied For
21		26				59-2117080			lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired			Additional Required
City & State City & State						6. Election Campaign Financing		\$5.00	May Be
23 28						Trust Fund Contribution			to Fees
Zip	Country	Zip	Coun	try		8. This corporation owes the curr	ent year Inta	ingible	
24	25		30			Personal Property Tax.		X Yes	□No
	9. Name and Address of Current	Registered Agent		1		10. Name and Address of New F	egistered /	Agent	
MENDOZA CALLA © COLULINO				B1	Name				
MENDOZA, CALLA & SCHILLING				32	Street Addre	ss (P.O. Box Number is Not Accepta	ble)		
251 ROYAL PALM WAY 6TH FLOOR PALM BEACH FL FL 33480-1310			_				<u> </u>		
FALI	M DEACH FL FL 33400-1310		8	33					
			8	34 (City	. '	FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the abo	ove-n	named corpor	ration submits this statement for the	numose of o	changing its	s registered
onice or r	registered agent, or both, in the State o am familiar with, and accept the obligation	t Florida. Such change was au ons of, Section 607.0505. Flori	thorized to da Statute	by the es.	e corporation	i's board of directors. I hereby accep	t the appoin	tment as re	egistered
SIGNATURE		,							. [
	Signature, typed or printed name of registered agent		Registered A	gent si	ignature required s	when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	ICERS AN		
TITLE	VS	☐ DELETE	1.1 TITLE	E				☐ Change	Addition
NAME	DE MENDOZA, MARIO G, III		1.2 NAM	E		÷			
STREET ADDRESS				1.3 STREET ADDRESS					
CITY-ST-ZIP	PALM BEACH, FL 00000 33480		1.4 CITY	-ST-Zi	IP	900 Feb. 1 date			
TITLE	• • •		2.1 TITLE	2.1 TITLE				☐ Change	☐ Addition
NAME	KANOUI, ERIC		2.2 NAM	Ε					-
STREET ADDRESS				2.3 STREET ADDRESS				•	İ
CITY-ST-ZiP	PALM BEACH, FL 00000 33480			2. 4 CrTY-ST-ZIP		···			
TITLE	_					- · · · · · · · · · · · · · · · · · · ·		☐ Change	Addition
NAME				3.2 NAME					
STREET ADDRESS 251 ROYAL PALM WAY 6TH FLOOR			1	3.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	PALM BCH. FL 33480	DELETE	3.4. CITY		ZIP .			П.С	A 2.000
		L'I DECETE	4.1 TITLE					☐ Change	☐ Addition
NAME STREET ADDRESS			4. 2 NAM						
			4.3 STRE						
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-		P				
NAME			5.1 TITLE 5.2 NAME					☐ Change	☐ Addition
STREET ADDRESS			5.3 STRE		IDDESS		•		İ
			5.4 CITY-						
TITLE		□ DELETE	6.1 TITLE		IF			Chana-	☐ Addition
NAME			6.2 NAME					☐ Change	☐ Addition
STREET ADDRESS .				6.3 STREET ADDRESS					1
OTHER VIDEOS			1 0.0 STATE	- 1	DITEGO				

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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(561) 689-9847

Daytime Phone #