

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

04-13-2001 90079 002 \*\*\*110.00

05-16-2001 90410 034 \*\*\*\*40.00

**DOCUMENT # F43047**

1. Entity Name

**GREENWICH INVESTMENTS, INC.**

Principal Place of Business

Mailing Address

~~C/O MENDOZA-ALLAS & SCHILLING~~  
~~251 ROYAL PALM WAY~~  
~~PALM BEACH FL 33480~~

~~C/O MENDOZA-ALLAS & SCHILLING~~  
~~251 ROYAL PALM WAY 602~~  
~~PALM BCH FL 33480~~  
~~US~~

2. Principal Place of Business

3. Mailing Address

**Mendoza and Callas****Mendoza and Callas**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**251 Royal Palm Way, #602****251 Royal Palm Way, #602**

City &amp; State

City &amp; State

**Palm Beach, FL****Palm Beach, FL**

Zip

Country

Zip

Country

**33480****USA****33480****USA**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MENDOZA, CALLA & SCHILLING**  
**C/O MENDORA AND CALLAS**  
**251 ROYAL PALM WAT STE 602**  
**PALM BEACH FL FL 33480-1310**

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, 2001 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	VS	TITLE	
NAME	DE MENDOZA, MARIO G, III	NAME	
STREET ADDRESS	251 ROYAL PALM WAY	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH, FL 00000 33480	CITY-ST-ZIP	
TITLE	PTD	TITLE	
NAME	KANOUI, ERIC	NAME	
STREET ADDRESS	251 ROYAL PALM WAY	STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH, FL 00000 33480	CITY-ST-ZIP	
TITLE	AS	TITLE	
NAME	WILKINSON, DEBRA	NAME	
STREET ADDRESS	251 ROYAL PALM WAY 6TH FLOOR	STREET ADDRESS	
CITY-ST-ZIP	PALM BCH. FL 33480	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: *Eric Kanoui*

Eric Kanoui, Pres.

X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(561) 747-5588

Daytime Phone #

CR2E034 (10/00)