FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## Mar 09, 2001 8:00 am **DOCUMENT # J66694 Secretary of State** INTERWORLD INVESTMENTS, INC. 03-09-2001 90474 005 \*\*\*150.00 Principal Place of Business Mailing Address 231 ALTARA AVENUE 231 ALTARA AVENUE CORAL GABLES FL 33146 CORAL GABLES FL 33146 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0017750 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired... Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GUITERREZ, SERGIO L Street Address (P.O. Box Number is Not Acceptable) 231 ALTARA AVENUE CORAL GABLES FL 33146 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete Change NAME **GUTIERREZ, SERGIO L** STREET ADDRESS STREET ADDRESS 231 ALTARA AVENUE CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES FL 33146 ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Change TITLE. ☐ Delete TITLE Addition 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 two and accordate 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 furustee emprovered 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, which other like shipowered.

GUTTERREZ, PRES.