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PROFIT CORPORATION ANNUAL REPORT

1997

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Apr 21 1997 8:00am

Secretary of State

4/10/17 (305) 649-0442 Daystime Priority 0185640

Sandra B, Mortham

Secretary of State
DIVISION OF CORPORATIONS

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(9)

AMBER INVESTMENTS, INC.

Principal Place of Business Mailing Address 311 SW 27TH AVENUE 311 SW 27TH AVENUE MIAMI FL 33135-2901 MIAMI FL 33135-9901 3a, Date of Last Report 3. Date Incorporated or Qualified 08/30/1988 04/18/1996 4. FEI Number Principal Place of Business 2a, Mailing Address Applied For 65-0073348 Not Applicable 21 26 Suite, Apt. #, etc Sulte, Apt #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country This corporation has liability for intangible tax under s. 199.032, Ζφ Country Zip 💹 Yes 🔲 No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ENCISO, ROSA MA **311 SW 27 AVENUE** Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33135 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ Change ☐ Addition ■ DELETE 1.1 TITLE TITLE ENCISO, ROSA MA. 1.2 NAME NAME 311 S.W. 27TH AVENUE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP CITY -ST-ZIP DELETE Addition Change 2.1 TITLE TILE CHIARI, RICARDO NAME 2.2 NAME 311 SW 27TH AVENUE 2 3 STREET ADDRESS STREET ADDRESS MIAM! FL 2. 4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE SALAZAR, MARTA 3.2 NAME 311 SW 27TH AVENUE STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 34 CITY-ST-ZIP CITY - ST - ZIP ☐ Addition DELETE Change THLE 41 TITLE MUXO, MARIA LUISA NAME 4. 2 NAME 311 SW 27TH AVENUE STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition 5.1 TITLE THILE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 DITY-ST-ZIP Addition DELETE 6.1 TITLE Change TITLE 6.2 NAME NAMA STREET ADDRESS 63 STREET ADDRESS CITY - ST- ZIP 64 CITY-ST-ZIP

14. I do 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 charged, or on an attachment with an address.