## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** DOCUMENT # **K57329** Mar 14, 2000 8:00 am **Secretary of State** DADE SOUTH DEVELOPMENT INVESTMENT CORP. 03-14-2000 90055 024 \*\*\*150.00 Mailing Address Principal Place of Business 751 WEST 81 ST 751 WEST 81 ST HIALEAH FL 33014 HIALEAH FL 33014-4135 US C0036927 2. Principal Place of Business 3. Mailing Address 14720 LEWIS ROAD 14720 LEWIS ROAD DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0132752 Miami Lakes, Florida Miami Lakes, Florida Not Applicable Country Country Zip 33014 \$8.75 Additional Zip 33014 5. Certificate of Status Desired Miami-DAde Miami-DAde Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PALACIO, PABLO A Street Address (P.O. Box Number is Not Acceptable) 14720 LEWIS ROAD 751 WEST 81 ST HIALEAH FL 33014 City Mi<u>ami Lakes</u> Zip Code 33014 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. 02-29-2000 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be fter MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees **[**] Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change PD TITLE Delete CARBAJAL, LAZARO NAME NAME 14720 Lewis Road STREET ADDRESS STREET ADDRESS 751 WEST 81 ST CITY-ST-ZIP Miami Lakes, Fl. 33014 CITY-ST-ZIP HIALEAH FL ☐ Addition Change TITLE vpst ☐ Delete TITLE PALACIO, PABLO A. NAME NAME STREET ADDRESS 14720 LEWIS ROAD STREET ADDRESS 7208 N BENDLINGTON ROAD CITY-ST-782 MIAMI LAKES, F1. 33014 CITY-ST-ZIP MIAMI LAKES FL ☐ Change Addition Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

SIGNATURE: (X) JULIU CAM M Lazaro Carvajal-Pres 02-29-2000 (305)886-0022

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 given like empowered.

CITY-ST-ZIP

CITY-ST-ZIP