

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 28, 2001 8:00 am**  
**Secretary of State**

02-28-2001 90049 017 \*\*\*150.00

**DOCUMENT # K73359**

1. Entity Name  
**BISCAPE INVESTMENTS, INC.**

010104



DO NOT WRITE IN THIS SPACE

Principal Place of Business 777 BRICKELL AVENUE 5TH FLOOR MIAMI FL 33131 US	Mailing Address 777 BRICKELL AVENUE 5TH FLOOR MIAMI FL 33131 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number <b>65-0109953</b>	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**CANTOR, STEVEN L.**  
**777 BRICKELL AVE.**  
**5TH FLOOR**  
**MIAMI FL 33131**

**7. Name and Address of New Registered Agent**

Name  
**SIC Corporate Services, Inc.**

Street Address (P.O. Box Number is Not Acceptable)  
**777 Brickell Ave., Suite 500**

City  
**Miami**      **FL**      Zip Code  
**33131**

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 **Steven L. Cantor, Pres.**      02/21/01

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) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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**11. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD</b> <b>ROSALES, BENJAMIN A.</b> <b>777 BRICKELL AVE. 5TH FLOOR</b> <b>MIAMI FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSD</b> <b>ROSALES, MARIA EUGENIA</b> <b>777 BRICKELL AVE. 5TH FLOOR</b> <b>MIAMI FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:      **February 16, 2001**      305-374-3886

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (10/00)

Attachment # K 73359  
816134

**LAW OFFICES**  
**STEVEN L. CANTOR, P.A.**  
**SUNTRUST BUILDING - SUITE 500**  
**777 Brickell Avenue**  
**Miami, Florida 33131**  
**Telephone (305) 374-3886**  
**Facsimile (305) 371-4564**  
**E-Mail: Lourdes@stevencantor.com**  
**Website: www.stevencantor.com**

February 22, 2001

**Via Certified Mail No. P867 402 818**

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

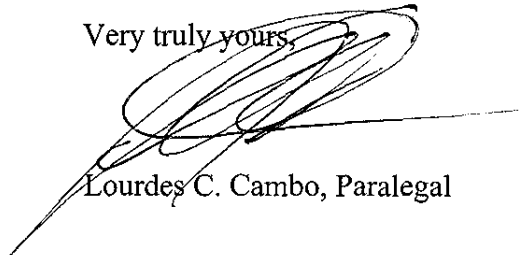
RE: Biscap Investments, Inc.  
Our Client File Number 1828.002

Dear Sir/Madam:

Enclosed please find the original fully executed 2001 Uniform Business Report for the above referenced corporation. I have also enclosed the check in the amount of \$150.00 representing the applicable filing fee this corporation.

Thank you for your kind attention and assistance regarding this matter. Should you have any questions, please do not hesitate to contact me.

Very truly yours,



Lourdes C. Cambo, Paralegal

Enclosure

H:\DOCS\LOURDES\Annual Reports\Rosales\Biscap fl rept ltr.wpd