

# 2001 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT #** L00000004962

**1. Entity Name**  
INVEST IMPEX LLC

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 NOV -1 AM 9:55

**Principal Place of Business**  
941 FOURTH STREET  
#200M  
MIAMI BEACH FL 33139

**Mailing Address**  
941 FOURTH STREET  
#200M  
MIAMI BEACH FL 33139



**2. Principal Place of Business**  
Suite, Apt. #, etc.  
City & State  
Zip

**3. Mailing Address**  
Suite, Apt. #, etc.  
City & State  
Zip

**4. FEI Number**  
☐ Applied For  
☒ Not Applicable

**5. Certificate of Status Desired** ☐ \$5.00 Additional Fee Required

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

**7. Name and Address of New Registered Agent**  
Name: Florida Filing & Search Services, Inc.  
Street Address (P.O. Box Number is Not Acceptable): 1333 N. Duval St.  
City: Tallahassee FL Zip Code: 32303

**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: ABIE P. HODGE, V. President DATE: 11/1/01  
(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$50.00**  
Make Check Payable to Department of State

**9. MANAGING MEMBERS / MEMBERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MBR - Manager WORLD FUND, INC. STE 302, E BLDG NO34/20, CUBA AVE & 34TH ST. PANAMA CITY 5, PANAMA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MBR - Manager EURO-AMEX EXCHANGE, INC. STE 302, E BLDG NO34/20, CUBA AVE & 34TH ST. PANAMA CITY 5, PANAMA	<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

**10. ADDITIONS / CHANGES**

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	000004663670--0	<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

**11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.**

**SIGNATURE:** RICARDO J. PEREZ  
Date: 01.08.2001  
Daytime Phone #

0000917 AF

CR2E083 398025

**FLORIDA FILING & SEARCH SERVICES, INC.**

P.O. BOX 10662 TALLAHASSEE, FL 32302

PH: (850) 668-4318 FX: (850) 668-3398

DATE: 11-01-01  
ACCOUNT NO: FCA0000000015  
AUTHORIZATION: ABBIE/PAUL HODGE

*Abbie Hodge*

TYPE OF FILING: REINSTATEMENT

NAME: INVEST IMPEX, LLC

SPECIAL INSTRUCTIONS: NONE

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 NOV - 1 AM 9:55

RECEIVED  
01 NOV - 1 PM 3:24  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA