

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90265 023 ***150.00

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DOCUMENT # L19609

1. Entity Name

BIV INVESTMENTS AND MANAGEMENT, INC.



Principal Place of Business

**1101 BRICKELL AVE
STE 701
MIAMI FL 33131
US**

Mailing Address

**1101 BRICKELL AVE
STE 701
MIAMI FL 33131
US**

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

65-0145363

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

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

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	CASTILLO-SANTOS, JORGE A	
STREET ADDRESS	BANCO INDUSTRIAL DE VENEZUELA	
CITY-ST-ZIP	CARACAS VE	
TITLE	V	<input type="checkbox"/> Delete
NAME	RODRIGUEZ, MARCOS	
STREET ADDRESS	BANCO INDUSTRIAL DE VENEZUELA	
CITY-ST-ZIP	CARACAS VE	
TITLE	SD	<input type="checkbox"/> Delete
NAME	BARROS-LLOBELL, SILVINA	
STREET ADDRESS	1101 BRICKELL AVE. SUITE 701	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	LADES-CHIRINOS, MARTIN	
STREET ADDRESS	BANCO INDUSTRIAL DE VENEZUELA	
CITY-ST-ZIP	CARACAS VE	
TITLE	GM	<input type="checkbox"/> Delete
NAME	FERRER-LOPEZ, ILDEFONSO	
STREET ADDRESS	1101 BRICKELL AVE, STE 701	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEONARDO GONZALEZ DELLAN	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VACANCY	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marcos Rodriguez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marcos Rodriguez

Date

305 372 0225

Daytime Phone #

CR2E034 (10/02)