

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # L81813**

1. Entity Name

MCLWR INVESTMENTS, INC.**FILED**
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90015 033 ***150.00

Principal Place of Business

**95 MERRICK WAY
SUITE 420
CORAL GABLES FL 33134**

Mailing Address

**95 MERRICK WAY
SUITE 420
CORAL GABLES FL 33134**

2. Principal Place of Business

95 Merrick Way

Suite, Apt. #, etc.

420

3. Mailing Address

95 Merrick Way

Suite, Apt. #, etc.

420

City & State

Coral Gables, FL

City & State

Coral Gables, FL

Zip

33134

Country

U.S.

Zip

33134

Country

U.S.

4. FEI Number

65-0203722

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MERLIN, ROBERT J.
95 MERRICK WAY
SUITE 420
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

ROBERT J. MERLIN

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

95 Merrick Way**Suite 420**

City

Coral Gables**FL**

Zip Code

33134

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

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) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

| | | |
|----------------|---------------------------|---------------------------------|
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | MERLIN, ROBERT J. | |
| STREET ADDRESS | 5810 MAGGIORE ST. | |
| CITY-ST-ZIP | CORAL GABLES FL | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | LEVINE, IRWIN | |
| STREET ADDRESS | 4293 PRAIRIE AVE | |
| CITY-ST-ZIP | MIAMI BEACH FL | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | COHEN, MARK S. | |
| STREET ADDRESS | 2525 SANDS WAY | |
| CITY-ST-ZIP | COOPER CITY FL | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | RODSTEIN, H. JOSH | |
| STREET ADDRESS | 12635 SW 114TH AVE | |
| CITY-ST-ZIP | MIAMI FL | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | WEISSER, MARK | |
| STREET ADDRESS | 4001 N. 50TH AVE. | |
| CITY-ST-ZIP | HOLLYWOOD FL | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert J. Merlin

1/11/01

Date

(305) 448-1555

Daytime Phone #

CR2E034 (10/00)