

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L81813

FILED  
Jan 10, 2003  
Secretary of State

Entity Name: MCLWR INVESTMENTS, INC.

**Current Principal Place of Business:**

95 MERRICK WAY  
SUITE 420  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

95 MERRICK WAY  
SUITE 420  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 65-0203722      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MERLIN, ROBERT J.,  
Address: 5810 MAGGIORE ST.  
City-St-Zip: CORAL GABLES, FL

Title: D ( ) Delete  
Name: LEVINE, IRWIN,  
Address: 4293 PRAIRIE AVE  
City-St-Zip: MIAMI BEACH, FL

Title: D ( ) Delete  
Name: COHEN, MARK S.,  
Address: 2525 SANDS WAY  
City-St-Zip: COOPER CITY, FL

Title: D ( ) Delete  
Name: RODSTEIN, H. JOSH,  
Address: 12635 SW 114TH AVE  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: WEISSER, MARK,  
Address: 4001 N. 50TH AVE.  
City-St-Zip: HOLLYWOOD, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J. MERLIN

D

01/10/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date