

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90055 013 ***150.00

DOCUMENT # M34646

1. Entity Name

WATSCO INVESTMENTS I, INC.

Principal Place of Business

Mailing Address

2665 S. BAYSHORE DR.
 901
 MIAMI FL 33133

2665 S. BAYSHORE DR.
 901
 MIAMI FL 33133-5401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2696358

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOGAN, BARRY S
C/O WATSCO, INC.
2665 S. BAYSHORE DRIVE, #901
MIAMI FL 33133

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.

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	LOGAN, BARRY S	324 CADIMA AVENUE	CORAL GABLES FL 33134	<input checked="" type="checkbox"/>
VSD	PEREZ DE LA MESA, MANUEL	15885 WEST PRESWICK PLACE	MIAMI LAKES FL 33014	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D V Asst. S	Menendez, Ana M.	2665 S. Bayshore Dr., Suite 901	Coconut Grove, FL 33133	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S. P. D	Logan, Barry S.	324 Cadima Ave.	Coral Gables, FL 33134	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Asst. Treas.	Palmese, Daniel	2665 S. Bayshore Dr., Suite 901	Coconut Grove, FL 33133	<input type="checkbox"/>	<input checked="" type="checkbox"/>
T	Zulueta, Doris	2665 S. Bayshore Dr., Suite 901	Coconut Grove, FL 33133	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

Daniel Palmese
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel Palmese
Asst. Treasurer

03/21/00

(305) 714-4119

Date

Daytime Phone #

CR2E034 (9/99)