2002 Uniform Business Report (UBR)

FILED Apr 17, 2002 8:00 am Secretary of State

1. Entity Na	IMENT # P0000 VESTMENT PROPERTIES, IN	0043143 c.	• -	• ท์		Secretar 04-17-2002 90	•		e
777.73		1			!				
Principal Pla	ce of Business	Mailing Address		_					
670 NW 114TH ST 670 NW 114TH ST									
MIAMI FL 33168-3338 MIAMI FL 33168-3			38						
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<u> </u>									
2. Principal Place of Business		3. Mailing Address				L 1894.1004 ein Adter marts marte Ratte barte Berr	. 84869 11681 1184	#1868 1365 1865	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			``	DO NOT WRITE IN THIS SPACE			
City B Cto	· · · · · · · · · · · · · · · · · · ·	O'the B Orest							_,
City & State		City & State			4. 1	FEI Number 65-1003962		pplied For ot Applicable	_
Zip	Country	Zip	Coun	try		Certificate of Status Desired	\$8.75 Ac		4
•••					l		Fee Requir		╛
··	6. Name and Address of Current R	egistered Agent		Name	7. 1	Name and Address of New Registered	Agent		4
ALAN: KC	OON YAU				• • 8° 5° - • 1• 2				ا ـ ـ
. 670 NW 114TH ST.				Street Address (P.O. Box Number Is Not Acceptable)					
MIAMI AL	33168-3338								7
	•			City		FI	Zip Cod	fe	- K
8. The shows	named entity submits this statement for	the number of changing its	egistore	ud office o	ropintored as		<u> </u>		- "
5. 11.0 00010	Thanke Gray Schmid and Statement (G	the perpose of changing its :	ofisio:	a onice or	registered ag	ent, or both, in the State of Florida.			6.
SIGNATURE									1.
	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE:	Registered	Agent signat	ure required when re	instating) DATE			1
	oration is eligible to satisfy its Intangible	FILE NOW!				10. Election Campaign Financing	¢c (O May Be	7
	requirement and elects to do so.	After May 1, 200 Make Check Payabl					☐ Adde	to Fees	
11.	OFFICERS AND D		12.			DITIONS/CHANGES TO OFFICERS AN	DIRECTOR	S IN 11	-{
TITLE	PSD	☐ Delete	TILE			OTTORIO TO OFFICE IS AN	Change	Addition	1 2
NAME	ALAN, KOON YAU		NAME						8
STREET ADDRESS CITY-ST-ZIP	670 NW 114TH ST MIAMI FL 33168-3338		11	T ADDRESS ST-ZIP					CR2E034 (9/01)
TITLE	VD	☐ Delete	TITLE		VO		V		18
NAME	CHEUNG, KAM FUNG	L. Detete	NAME			S VALA EUROG	Change	☐ Addition	l°
STREET ADDRESS	670 NW 114TH ST		STREE	T ADDRESS	トフへるこ	S, KAM FUNG WING ST			
CITY-ST-ZIP	MIAMI FL 33168-3338	, , , , , , , , , , , , , , , , , , ,	CITY-	ST-ZIP	W/ 14	~11,12 c 33(68			1
TITLE		Delete	ITTLE				☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME	T ADDRESS					
CITY-ST-ZIP			17	ST-ZIP					
TITLE		☐ Delete	TITLE				☐ Change	Addition	1
NARIE CIDCET ADDOCCO			RAINE	<u></u>			بتنه استعند		;
STREET ADDRESS CITY-ST-ZIP	· - ·	7	CITY-	T ADDRESS ST-71P		·	-		1
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition	ĺ
NAME			NAME	1					
STREET ADDRESS			II	T ADDRESS					
CITY-ST-ZIP	***		CITY-S	SI-ZI			□ Δ	— 4.225	(
NAME		☐ Delete	TITLE NAME	ŀ			☐ Change	Addition	
Street address			II	ADDRESS					
CITY-ST-ZIP			CITY-S		<u> </u>				l
ii iuicateu	ertify that the information supplied with the on this report or supplemental report is tri poration or the receiver or trustee empower	Je and accurate and mai my	SIDERIL	re snall na	ve me same e	Mai enert es il made i inder calle that i e	om on officer.	or director	