

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90345 022 ***158.75

DOCUMENT # P00000051605

1. Entity Name
SOUTH 101 INVESTMENT, INC.



Principal Place of Business
2600 SW THIRD AVE.
#730
MIAMI FL 33129

Mailing Address
2742 BISCAYNE BLVD
MIAMI FL 33137



2. Principal Place of Business

3. Mailing Address
2600 SW 3rd. Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Miami, FL

4. FEI Number 65-1010712

Applied For
Not Applicable

Zip

Country

Zip
33129

Country
USA

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

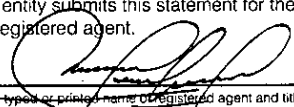
6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DE VARONA, RAUL SANCHEZ
145 MADERIA AVENUE
SUITE 310
CORAL GABLES FL 33134

Name
Guzman, Mario
Street Address (P.O. Box Number is Not Acceptable)
Two Dorian Center
9130 S. S. Boulevard Suite 1504
City
Miami **FL** Zip Code
33156

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  **MARIO GUZMAN**
(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

3/22/03
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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSD** ☐ Delete
NAME **BARBAGALLO, MIGUEL ANGEL**
STREET ADDRESS **2875 N.E. 191ST ST., PH 3A**
CITY-ST-ZIP **AVENTURA FL 33180**

TITLE ☒ Change ☐ Addition
NAME **2600 SW 3rd. Avenue #730**
STREET ADDRESS **Miami, FL 33129**
CITY-ST-ZIP

TITLE **VD** ☐ Delete
NAME **RIZZUTI, CARLOS**
STREET ADDRESS **2875 N.E. 191ST ST., PH 3A**
CITY-ST-ZIP **AVENTURA FL 33180**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **BARBAGALLO, SEBASTIAN**
STREET ADDRESS **2875 N.E. 191ST ST., PH 3A**
CITY-ST-ZIP **AVENTURA FL 33180**

TITLE ☒ Change ☐ Addition
NAME **2600 SW 3rd. Avenue #730**
STREET ADDRESS **Miami, FL 33129**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied in 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 authorized 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 or other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/17/03

Date

(305) 833-7627

Daytime Phone #

CR2E034 (10/02)