

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F000000052170

Entity Name

Mora Investments, Inc.

FILED

02 MAY -1 PM 2:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Principal Place of Business 4779 Collins Ave #1706 Miami Beach, FL 33141		2. Mailing Address 4779 Collins Ave #1706 Miami Beach, FL 33140	
3. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 6495 SW 2451 Suite, Apt. #, etc.	
City & State Miami FL		City & State Miami FL	
Zip 33155	Country	Zip 33155	Country

DO NOT WRITE IN THIS SPACE

4. FCI Number 65-1030560		Applied For Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent Lisette Salazar, Esq. Lisette Pic Salazar PA 1390 Brickell Ave Suite #200 Miami, FL 33131		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 fee if applicable.		(NOTE: Registered Agent signature required when reinstating)	
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See ch...		FILE NOW!!! FEE \$8.75 \$50.00 APR/MAY 1, 2000 Fee will be \$500.00 TOTAL PAID \$8.75 TOTAL	
10. Election Campaign Financing Total Fund Contribution (check one) ☐ \$5.00 May Be Added to Fees			

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11-	
☐ Delete D Claudia Lelia Carraro 4779 Collins Ave Suite 1706 Miami Beach, FL 33140	☐ Change ☐ Addition 300005500723--8 -05/09/02--01055--024 ****158.75 ****158.75	☐ Change ☒ Addition Secretary Jorge L Reyes 6495 SW 2451 Miami, FL 33155	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
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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:	CLAUDIA CARRARO	DATE: 5/8/02
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