

5/17

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jun 29, 2001 8:00 am
Secretary of State

05-17-2001 91292 016 ***150.00

DOCUMENT # P00000074550

1. Entity Name

JAMERCO INVESTMENTS, INC.

Principal Place of Business

**14230 ALAMANDA AVE
MIAMI LAKES FL 33014**

Mailing Address

**14230 ALAMANDA AVE
MIAMI LAKES FL 33014**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

☒ Applied For
☐ Not Applicable5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SANCHEZ-NEDINA, ROLAND JR ESQ
C/O MCDERMOTT, WILL & EMERY
201 S BISCAYNE BLVD, 22ND FLOOR
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name **VICTOR J. MEJIA**Street Address (P.O. Box Number is Not Acceptable)
14230 ALAMANDA AVECity **Miami-Lakes****FL**Zip Code
33014

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, 2001 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

TITLE ☐ DeleteNAME **PRESIDENT**
VICTOR J. MEJIA
STREET ADDRESS **14230 ALAMANDA AVE**
CITY-ST-ZIP **MIAMI LAKES, FL 33014**TITLE ☐ DeleteNAME **VICE-PRESIDENT**
MERLY M. MEJIA
STREET ADDRESS **14230 ALAMANDA AVE**
CITY-ST-ZIP **MIAMI LAKES, FL 33014**TITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIP

13. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/2001

Date

305-821-4044

Daytime Phone #

CR2E034 (10/00)