

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90575 027 ***150.00

0149354

DOCUMENT # P00000081500

1. Entity Name

VENZAM REAL ESTATE INVESTMENTS, INC.

Principal Place of Business

Mailing Address

**777 BRICKELL AVENUE
 SUITE 1070
 MIAMI FL 33131**

**777 BRICKELL AVENUE
 SUITE 1070
 MIAMI FL 33131**

2. Principal Place of Business

3. Mailing Address

**3925
 Suite, Apt. #, etc.
 194th Lane**

**3925
 Suite, Apt. #, etc.
 194th Lane**

**City & State
 Miami Beach FL**

**City & State
 Miami Beach FL**

**Zip
 33160**

Country

**Zip
 33160**

Country

4. FEI Number

05-1063379

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

**MONTELLO, LOUIS R
 777 BRICKELL AVENUE
 SUITE 1070
 MIAMI FL 33131**

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Delete
 NAME **LEVY, ELI**
 STREET ADDRESS **777 BRICKELL AVENUE, SUITE 1070**
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE **Director and President** ☐ Change ☒ Addition
 NAME **Yannick Benzaoui**
 STREET ADDRESS **194th Lane**
 CITY-ST-ZIP **Miami Beach, FL 33160**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
 NAME
 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

Date

Daytime Phone #

(305) 682-9822

CR2E034 (10/00)