2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000096077

Entity Name: D. E. J. INVESTMENTS, INC.

FILED Apr 22, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
13965 SW 25TH TERR MIAMI, FL 33175				6701 NW 2 AVE MIAMI, FL 33150				
Current Mailing Address:				New Mailing Address:				
13965 SW 2 MIAMI, FL 3	25TH TERR 33175							
FEI Number: (65-1057975	FEI Number Applied For ()	El Num	ber Not Appli	cable ()	Certific	ate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
URIARTE, JESUS ESQ 4100 W FLAGLER ST SUITE K MIAMI, FL 33134				MUNOZ, DAVID 13965 SW 25 TERR MIAMI, FL 33175				
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.								
SIGNATUR	E: DAVID MU	JNOZ				(04/22/2002	
	Electroni	c Signature of Registered Agent					Date	
Election Cam		satisfy its Intangible Tax filing requirer Trust Fund Contribution(). 「ORS:				ES TO OFI	FICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () MUNOZ, DAVID 13965 SW 25TH MIAMI, FL 3317			Title: Name: Address: City-St-Zip:	P MUNOZ, DA 13965 SW I MIAMI, FL	AVID 25TH TERR	() Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP BARRERA, 5661 SW 1 MIAMI, FL	MARCIA 29 PL	(X) Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	T MUNOZ, MA 2411 SW 1 MIAMI, FL	ARINA L 8 ST	(X) Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	S BARRERA, 5661 SW 1 MIAMI, FL	29 PL	(X) Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	C MUNOZ, JO 2411 SW 1 MIAMI, FL	SE A 8 ST	(X) Addition	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D MUNOZ, EL 13965 SW MIAMI, FL	.SA 25 TERR	(X) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

	Flacture is Oissant as of Oissains Officer and Dissains		D-1-
SIGNATURE:	DAVID MUNOZ	Р	04/22/2002