

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90159 014 ***158.75

DOCUMENT # P00000099726

1. Entity Name
BONSAI INVESTMENTS, INC.

Principal Place of Business

**PO BOX 940487
 MIAMI FL 33194-0487**

Mailing Address

**PO BOX 940487
 MIAMI FL 33194-0487**

2. Principal Place of Business

**24 So. EXUMA Rd
 Suite, Apt. #, etc.
 Key Largo FL**

3. Mailing Address

**24 So EXUMA Rd
 Suite, Apt. #, etc.
 Key Largo F**

City & State

City & State

**Zip
 33037**

Country

33037

Country

4. FEI Number

65-1049573

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CABALLERO, MARCIA B
 2450 SW 137TH AVENUE SUITE 221
 MIAMI FL 33175**

7. Name and Address of New Registered Agent

Name

ZONIA C Reyes

Street Address (P.O. Box Number is Not Acceptable)

24 So. EXUMA Rd

Key Largo FL

City

FL

Zip Code

33037

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 **ZONIA C Reyes**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

Zonia C Reyes

DATE

4/20/02

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	VD REYES, JOSE PO BOX 940487 MIAMI FL 33194-0487	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD REYES, ZONIA PO BOX 940487 MIAMI FL 33194-0487	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD REYES, JOSEPH PO BOX 940487 MIAMI FL 33194-0487	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RODRIGUEZ, ELIZABETH PO BOX 940487 MIAMI FL 33194-0487	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 24 So. EXUMA Rd Key Largo FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 24 So. EXUMA Rd Key Largo FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 24 So EXUMA Rd Key Largo FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 24 EXUMA Rd Key Largo FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

4/20/02

305-742-6107

Date

Daytime Phone #

CR2E034 (9/01)