

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90164 013 ***150.00

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1. Entity Name
AMAZON INVESTMENT GROUP, INC.



Principal Place of Business
1623 16TH COURT
JUPITER FL 33477

Mailing Address
1623 16TH COURT
JUPITER FL 33477

2. Principal Place of Business

14255 US HIGHWAY ONE

3. Mailing Address

9397 SE RIVER TERR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE # 291

City & State

City & State

JUNO BEACH, FL.

TEQUESTA, FL.

Zip

Country

Zip

Country

33408

PAUM BCH.

33469

MARTIN

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MIEGEL, SCOTT R SR.
155 TONEY PENNA DRIVE 1B
JUPITER FL 33458

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
COATES, LARA A
1623 16TH COURT
JUPITER FL 33477

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

TITLE
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STREET ADDRESS
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Change Addition

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CITY-ST-ZIP
Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Change Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lara A Coates
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/03 (561) 748-4204
Date Daytime Phone #

CR2E034 (10/02)