

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000110433

1. Entity Name

CORPORACION LYNN INVESTMENTS, INC.

FILED

Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90075 002 ***150.00

Principal Place of Business

9300 S DADELAND BLVD SUITE 406
MIAMI FL 33156

Mailing Address

9300 S DADELAND BLVD SUITE 406
MIAMI FL 33156

2. Principal Place of Business

9709 Arbor Oaks Lane

Suite, Apt. #, etc.
101

3. Mailing Address

9709 Arbor Oaks Lane

Suite, Apt. #, etc.
101

City & State

Boca Raton, FL 33428

City & State

Boca Raton, FL 33428

Zip

Country

Zip

Country

4. FEI Number

65-1064031

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KAPLAN, LINDA M

9300 S DADELAND BLVD SUITE 406
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

ALFREDO RODRIGUEZ

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

20283 STATE ROAD 7 SUITE 300

City

BOCA RATON

FL

Zip Code

33498

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 D ☐ Delete
NAME RODRIGUEZ ARUJO, ALFRED E
STREET ADDRESS 9709 ARBOR OAKS LANE #101
CITY-ST-ZIP BOCA RATON FL 33428

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D/P ☒ Change ☐ Addition
NAME RODRIGUEZ ARUJO, ALFRED
STREET ADDRESS 9709 ARBOR OAKS LANE #101
CITY-ST-ZIP BOCA RATON, FL 33428

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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TITLE ☐ Change ☐ Addition
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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 #

CR2E034 (10/00)

0005046