## 2002 UNIFORM BUSINESS REPORT (UBR)

**SIGNATURE** 

## Feb 07, 2002 8:00 am P01000018729 DOCUMENT # **Secretary of State** 02-07-2002 90134 001 \*\*\*300.00 MCWHITE CAPITAL & REAL ESTATE INVESTMENTS CORPOR ATION Mailing Address Principal Place of Business 3146 NW 68 STREET STE NO 1 3146 NW 68 STREET STE NO 1 FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State Not Applicable 65-1081 \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CLIFTON H RODRIQUEZ, CPA Street Address (P.O. Box Number is Not Acceptable) 3146 NW 68 STREET STE NO 1 FT LAUDERDALE FL 33309 5 Zip Code City 8. The above named entity submits this statement for the purpose of changing its register ed office or ed agent, or both FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election ampaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (9/01) Change Addition ☐ Delete TITLE TITLE MCWHITE, ALBERT R NAME NAME STREET ADDRESS 3501 W BROWARD BLVD STREET ADDRESS FT LAUDERDALE FL 33312 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change CE<sub>0</sub> ☐ Delete TITLE TITLE MCWHITE, ALBERT R NAME NAME STREET ADDRESS 3501 W BROWARD BLVD STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33312 CITY-ST-7IP ☐ Change Addition Delete\_ TITLE TITLE DS WALKER, KAI C NAME NAME STREET ADDRESS 3501 W BROWARD BLVD STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33312 CITY-ST-ZIE ☐ Addition Change ☐ Delete TITLE TITLE RODRIQUEZ, CLIFTON H NAME NAME STREET ADDRESS 3146 NW 68 STREET STE NO 1 STREET ADDRESS CITY-ST-7IP FT L'AUDERDALE FL 33309 CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

FILED