AMENDED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000018830

1. Entity Name
S & F INVESTMENTS, INC.

FILED
03 NOV 19 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
1402 WURST ROAD OCOEE, FL 34761	1402 WURST ROAD OCOEE, FL 34761

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3897791** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DESAI, SHEELA Y 1402 WURST ROAD OCOEE, FL 34761	Name: LANGARICA, JOSEBA GONZALEZ Street Address (P.O. Box Number Is Not Acceptable): 1402 Wurst Road City: Ocoee FL Zip Code: 34761

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: Joseba Gonzalez de Langarica — Nov. 11, 2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

[illegible]
[illegible]
Amended UBR is $61.25
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	P DESAI, SHEELA Y 1304 HAMPSHIRE PLACE CIRCLE ALTAMONTE SPRINGS, FL 32714	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Langarica, Joseba Gonzalez 1402 Wurst Road Ocoee, FL 34761	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DESAI, YOGESH B 1304 HAMPSHIRE PLACE CIRCLE ALTAMONTE SPRINGS, FL 32714	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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: Joseba Gonzalez de Langarica — Nov. 11, 2003 — 407-656-0006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

TK