## 2002 Uniform Business Report (UBR)

2002 Uniform Business Report (UBI				UBR)	FILED May 28, 2002 8:00 am Secretary of State	
1. Entity Na	JMENT # P01000 INVESTMENT GROUP INC.	0035174	L		04-10-2002 90354 027 ***150.00	
Principal Place of Business 4427 CEPEDA ST. ORLANDO FL 32811		Mailing Address 4427 CEPEDA ST. ORLANDO FL 32811		_		
2. Principal Place of Business 3. Mailing Address						
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE .	
City & State City & S		City & State	ity & State		4. FEI Number 59-37084/12 Applied For Not Applicable	
Zip	Country	Zip .	Country		5. Certificate of Status Desired	
	6. Name and Address of Current Re	gistered Agent		Name '	7. Name and Address of New Registered Agent	
HUNTLY, RICHARD				Street Address (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32811  8. The above named entity submits this statement for the purpose of changing its re				City FL Zip Code		
SIGNATURE	a named entity submits this statement for the signature, typed or printed name of registered agent and			office or registere		
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!! After May 1, 2002 Make Check Payable			! FEE IS	\$150.00 If be \$550.00	10. Election Campaign Financing	
11. OFFICERS AND DIRECTORS			12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Huntly, Richard 4427 Cepeda St. Orlando Fl 32811	🗀 Oekste	TITLE NAME STREET A		Change Addition Co. Addition Co	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Jenkins, Lovenia 4427 Cepeda St. Orlando Fl 32814	Delete	TITLE NAME STREET AI CITY-ST-	1	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET AS		☐ Change ☐ Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ALL CITY-ST-	DORESS	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE -NAME- STREET AC	DORESS	☐ Change ☐ Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	<u> </u>	. Oclete	CITY-ST-2 TITLE NAME STREET AD CITY-ST-2	ORESS	☐ Change ☐ Addition	
13, it hereby of indicated of the corp	certify that the information supplied with this on this report or supplemental report is true peration or the receiver or master empower	s filing does not quality for the and accurate and that my red to execute this report as	he exempti signature required t	on stated in Secti shall have the sar by Chapter 607, F	on 119.07(3)(i), Florida Statutes. I further certify that the information no legal effect as if made under oath; that I am an officer or director lorida Statutes; and that my name appears in Block 11 or Block 12 if	