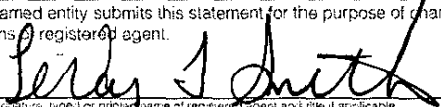
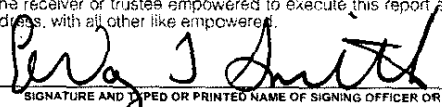


FILED
May 16, 2003 8:00 am
Secretary of State
05-16-2003 90187 030 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

90135868

DOCUMENT # P01000063772					
1. Entity Name YAVEL INVESTMENTS, INC.					
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 3900 WOODLAKE BLVD. Suite, Apt. #, etc. 210			3. Mailing Address 3900 WOODLAKE BLVD. Suite, Apt. #, etc. 210		
City & State GREENACRES, FLORIDA			City & State GREENACRES, FLORIDA		
Zip 33463		Country U.S.		4. FEI Number 75-3035865	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
DO NOT WRITE IN THIS SPACE				7. Name and Address of Current Registered Agent	
				Name LEVAY T. SMITH	
				Street Address (P.O. Box Number is Not Acceptable) 3900 WOODLAKE BLVD. SUITE 210	
				City GREENACRES FL Zip Code 33463	
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  3/1/2003 (NOTE: Registered Agent signature required when resigning)					
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 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					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		PRESIDENT, LEVAY T. SMITH 3900 WOODLAKE BLVD. SUITE 210 GREENACRES, FL 33463		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.					
SIGNATURE:  3/1/2003 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034B (12/02)