7/2/2002-90808-032-$150.00-$150.00

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
02 JUL 26 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000097359

1. Entity Name
MORGADO PROPERTY INVESTMENTS, INC.

Principal Place of Business	Mailing Address
102 BAYTREE CT. WINTER SPRINGS FL 32708	102 BAYTREE CT. WINTER SPRINGS FL 32708

DO NOT WRITE IN THIS SPACE

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

4. FEI Number
EIN 02-0619090
☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GARCIA, MARIO A ESQ.
315 E. ROBINSON ST., STE. 160
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 _____ DATE
(NOTE: Registered Agent signature required if not reinstating)

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, 2002 Fee will be $500.00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	
D	☐ Delete
MORGADO, JOSE MANUEL R LOCAL 10 PENTH HOUSE PUERTO ORDAZ - EDO. BOLIVAR	
D	☐ Delete
MORGADO, ANA LOCAL 10 PENTH HOUSE PUERTO ORDAZ - EDO. BOLIVAR	
	☐ Delete
	☐ Delete
	☐ Delete
	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
MORGADO, JOSE MANUEL R URB. CHILEMEX, C.C. CHILEMEX PISO 4, LOCAL 10 PUERTO ORDAZ, EDO BOLIVAR, VENEZUELA	☒ Change ☐ Addition
MORGADO, ANA URB. CHILEMEX, C.C. CHILEMEX PISO 4, LOCAL 10 PUERTO ORDAZ, EDO. BOLIVAR, VENEZUELA	☒ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition
	☐ Change ☐ Addition

CR2E036 (8/01)

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 person 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 REQUIRED
Signature and typed or printed name of individual
Date
Daytime Phone #

7/30/02