FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90246 003 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000118427

1. Entity Name

WINDERMER INVESTMENT GROUP CORP.

DO NOT WRITE IN THIS SPACE

11017298

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
1050 SEVILLA AVENUE		1050 SEVILLA AVENUE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: CORAL GABLES - FL		City & State: CORAL GABLES - FL	
Zip: 33134	Country: U.S.A.	Zip: 33134	Country: U.S.A.

4. FEI Number 59-3761361 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name JORGE PERICO

Street Address (P.O. Box Number is Not Acceptable).

155 OCEAN LANE DR. APT. 605

City KEY BISCAYNE FL Zip Code 33149

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 ______________________________

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	P/S	TITLE	
NAME	Jorge Perico	NAME	
STREET ADDRESS	7648 Sugar BEND DR.	STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, Fl 32819	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
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CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] JORGE PERICO 4-1-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #