

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2003 8:00 am**  
**Secretary of State**

04-17-2003 90158 046 \*\*\*150.00

**DOCUMENT # P02000023602**

1. Entity Name  
**ARAGON INVESTMENTS, INC.**



Principal Place of Business  
3558 W 73RD TERRACE  
HIALEAH, FL 33018

Mailing Address  
3558 W 73RD TERRACE  
HIALEAH, FL 33018

2. Principal Place of Business  
15952 SW 15th St  
Suite, Apt. #, etc.

3. Mailing Address  
15952 SW 15th St  
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State  
Pompano Beach, FL  
Zip 33027 Country

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Pompano Beach, FL  
Zip 33027 Country

4. FEI Number 03-0407215 Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

ARAGON, SANTIAGO SR.  
3558 W 73RD TERRACE  
HIALEAH, FL 33018

**7. Name and Address of New Registered Agent**

Name Aragon, Santiago D.  
Street Address (P.O. Box Number is Not Acceptable)  
15952 SW 15th St  
City Pompano Beach FL Zip Code 33027

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 Santiago Aragon Jr. Santiago D. Aragon DATE 4/11/03  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2003 Fee will be \$550.00  
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	PD ARAGON, SANTIAGO SR. 3558 W 73RD TERRACE HIALEAH, FL 33018	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Aragon, Santiago D. 15952 SW 15th St Pompano Beach, FL 33027	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Santiago Aragon Jr. Santiago D. Aragon DATE 4/11/03 305 591-3550  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/02)