

FILED
May 09, 2003 8:00 am
Secretary of State

04-21-2003 90433 029 ***150.00
05-09-2003 90151 037 *****8.75

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

90132314



☒ CHECK HERE IF MAKING CHANGES

DOCUMENT # P02000066553			
1. Entity Name LARES INVESTMENTS CORP.			
Principal Place of Business 611 RAEM ORLANDO, FL 32806		Mailing Address 611 RAEM ORLANDO, FL 32806	
2. Principal Place of Business #2101 1497 S. KIRKMAN RD		3. Mailing Address #2101 1497 S. KIRKMAN RD.	
City & State ORLANDO FL		City & State ORLANDO FL	
Zip 32811		Country USA	
4. FEI Number 03-0461482		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent AVELLAN, LILIANA V. ESQ. GARCIA & AVELLAN, P.A. 201 ALHAMBRA CIR, STE 500 CORAL GABLES, FL 33134		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____			
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
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TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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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 Block 11 if changed, or on an attachment with an address, with all other filers empowered.			
SIGNATURE: Jorge L. Orchilles JORGE L. ORCHILLES 4/16/03 954-554-1457			