2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90259 038 ***150.00

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DOCUMENT # P02000085403

1. Entity Name
INVESTMENTS OF THE FUTURE, INC.

Principal Place of Business	Mailing Address
19500 CYPRESS COURT MIAMI LAKES FL 33015	19500 CYPRESS COURT MIAMI LAKES FL 33015

2. Principal Place of Business	3. Mailing Address
1937 NE 147st.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: North Miami, FL	City & State
Zip: 33181 Country: U.S.	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: x05-0526061 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARQUEZ, MARIA ELENA 19500 CYPRESS COURT MIAMI LAKES FL 33015	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 x Maria E Marquez President 1/14/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARQUEZ, MARIA ELENA 19500 CYPRESS COURT MIAMI LAKES FL 33015	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VELEZ, MARIA TERESA 19500 CYPRESS COURT MIAMI LAKES FL 33015	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: x MARIA ELENA MARQUEZ 1/14/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #