

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90727 017 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000118672 1. Entity Name CORTES INVESTMENT GROUP, CORPORATION				90119634	
Principal Place of Business 601 BRICKELL KEY DR STE 802 MIAMI, FL 33131		Mailing Address 601 BRICKELL KEY DR STE 802 MIAMI, FL 33131			
2. Principal Place of Business 601 Brickell Key Drive		3. Mailing Address 601 Brickell Key Drive			
Suite, Apt., etc. SK-802		Suite, Apt., etc. SK-802			
City & State Miami, FL		City & State Miami, FL			
Zip 33131		Zip 33131			
Country USA		Country USA			
4. FEIN Number 05-0563465		Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		☐ CHECK HERE IF MAKING CHANGES			
6. Name and Address of Current Registered Agent VAZQUEZ, GERARDO A 601 BRICKELL KEY DR STE 802 MIAMI, FL 33131			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 _____ Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent's signature required when resigning.)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$650.00 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			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
☐ Delete			☐ Change ☒ Addition		
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☐ Delete			☐ Change ☐ 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, both as otherwise empowered.					
SIGNATURE: <u>Herzen Cortes</u> 1/30/03 (305) 371-8064 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CREATED 05/02/03