

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

DOCUMENT # P02000128415

1. Entity Name
 2201 INVESTMENT HOLDINGS, INC.



90113579

Principal Place of Business
 2188 NW 25 AVE
 MIAMI, FL 33142

Mailing Address
 2188 NW 25 AVE
 MIAMI, FL 33142

2. Principal Place of Business
 2201 N.W. 25TH AVE.
 Suite, Apt. #, etc.

3. Mailing Address
 3663 SW 8TH ST
 Suite, Apt. #, etc.
 PENT HOUSE

City & State
 MIAMI, FLORIDA

City & State
 MIAMI, FLORIDA

Zip
 33142

Country
 DADE

Zip
 33135

Country
 DADE



CHECK HERE IF MAKING CHANGES

4. FEI Number **45-1565096** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

DIAZ, RUBEN A JR
 2188 NW 25 AVE
 MIAMI, FL 33142

7. Name and Address of New Registered Agent

Name **FELIPE A. VALLS, JR**
 Street Address (P.O. Box Number is Not Acceptable)
3663 S.W. 8TH ST, THIRD FLOOR
 City **MIAMI** FL Zip Code **33135**

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]* **FELIPE A. VALLS, JR** DATE **4/9/2003**

FILE NOV 11 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	P CABALLERO, RAFAEL 2188 NW 25 AVE MIAMI, FL 33142	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DIAZ, RUBEN 2188 NW 25 AVE MIAMI, FL 33142	<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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT FELIPE A VALLS, JR 3663 SW 8TH ST, PH MIAMI, FL 33135	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY FELIPE A. VALLS, JR 3663 SW 8TH ST, PH MIAMI, FL 33135	<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
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

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 *[Signature]* **FELIPE A. VALLS, JR** DATE **4/9/2003** DAYTIME PHONE # **305-4464916**

CR2E034 (10/02)