

# UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P03000118298**

1. Entity Name

**C.F. INVESTMENT GROUP, INC.**

FILED

07 OCT -3 PM 2:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

**15005 SW 64 STREET  
MIAMI FL 33193**

Mailing Address

**15005 SW 64 STREET  
MIAMI FL 33193**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

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

**ESTERLAND DELAINE J  
9200 SOUTH DADELAND BLVD  
SUITE 204  
MIAMI FL 33156**

Name

**CARLOS FONTE**

Street Address (P.O. Box Number is Not Acceptable)

**15005 SW 64TH STREET**

City

**MIAMI**

FL

Zip Code

**33193**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**9/28/07**

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back.) ☐

FILE NOW!!! FEE IS \$150.00

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **FONTE CARLOS**  
STREET ADDRESS **15005 SW 64TH STREET**  
CITY - ST - ZIP **MIAMI FL 33193**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**300110234773**  
**10/03/07--01036--011 \*\*\$150.00**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**10/03/07 01036 010 \$150.00**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

CP2E024 (11/00)

**C.F. INVESTMENTS GROUP, INC.**  
**15005 SW 64<sup>TH</sup> STREET**  
**MIAMI FL 33193**

September 15, 2007

Division of Corporations  
Annual Report Section  
P.O. Box 6327  
Tallahassee, FL 32314

REF: DOCUMENT#: P05000118298  
2006 & 2007

Dear Sir or Madam:

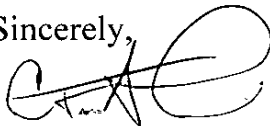
Please be advised that the above-mentioned corporation annual report was never received for timely submission.

Therefore, we are requesting that the delinquent fees be waived and that the corporation is allowed to submit a second annual report with the corresponding fee of \$ 150.00 for each year.

Please advise.

Your cooperation is appreciated.

Sincerely,

A handwritten signature in black ink, appearing to be 'Carlos Fonte', written over a horizontal line.

Carlos Fonte