

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P16917

1. Entity Name  
C & R INVESTMENTS, INC. OF PANAMA

Principal Place of Business  
2401 SOUTH OCEAN DR  
SUITE 1405  
HOLLYWOOD FL 33019

Mailing Address  
2401 SOUTH OCEAN DR  
SUITE 1405  
HOLLYWOOD FL 33019

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 59-2156919

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

LAW OFFICES OF ZAEDY R. POZO  
2655 LE JEUNE RD  
PH II  
CORAL GABLES FL 33134

Name: ZAEDY R. POZO  
Street Address (P.O. Box Number is not acceptable): 2655 Le Jeune Rd  
City: PH II  
State: FL  
Zip Code: 33134

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 re-stating)

DATE

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  
After MAY 1, 2001 Fee will be \$550.00  
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: PD  
NAME: ZAZO, AGUSTIN LOPEZ  
STREET ADDRESS: 2401 S. OCEAN DR #1405  
CITY-ST-ZIP: HOLLYWOOD FL 33019 ☐ Delete

TITLE: DTS  
NAME: ZAZO, CARMEN LOPEZ  
STREET ADDRESS: 2401 S. OCEAN DR #1405  
CITY-ST-ZIP: HOLLYWOOD FL 33019 ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
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CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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 an officer like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

AGUSTIN LOPEZ ZAZO, 7/26/01 (305) 442-7141

FILED  
Sep 18, 2001 8:00 am  
Secretary of State

09-18-2001 90028 001 \*\*\*400.00  
09-18-2001 90028 002 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)