

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90258 001 ***150.00
 05-14-2002 90258 002 *****8.75

DOCUMENT # P92000010061

1. Entity Name

INVESTMENTS OF AMERICA NO.2, INC.

Principal Place of Business

**1717 N BAYSHORE DR
 STE 208
 MIAMI FL 33132**

Mailing Address

**1717 N BAYSHORE DR
 STE 208
 MIAMI FL 33132**

2. Principal Place of Business

150 Alhambra Circle

3. Mailing Address

150 Alhambra Circle

Suite, Apt. #, etc.

Suite 800

Suite, Apt. #, etc.

Suite 800

City & State

**Coral Gables, FL
 Zip Country**

33134 USA

City & State

**Coral Gables, FL
 Zip Country**

33134 USA

4. FEI Number

65-0383218

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**S & K PROPERTY MANAGEMENT INC
 1717 N BAYSHORE DR
 STE 208
 MIAMI FL 33132**

7. Name and Address of New Registered Agent

Name

S & K Property Management, Inc.

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

150 Alhambra Circle

Suite 800

City

Coral Gables

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 reinstating)

DATE

Lidia Cartaya, Vice President 04/29/02

9. This corporation is eligible to satisfy its Intangible

3 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 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** ☐ Delete
 NAME **BUCKREUS, GERTI**
 STREET ADDRESS **1717 N. BAYSHORE DR., STE 208**
 CITY-ST-ZIP **MIAMI FL 33132**

TITLE **SV** ☐ Delete
 NAME **CARTAYA, LIDIA**
 STREET ADDRESS **1717 N. BAYSHORE DR., STE 208**
 CITY-ST-ZIP **MIAMI FL 33132**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☒ Change ☐ Addition
 TITLE
 NAME
 STREET ADDRESS **150 Alhambra Circle, Suite 800**
 CITY-ST-ZIP **Coral Gables, FL 33134**

☒ Change ☐ Addition
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 STREET ADDRESS **150 Alhambra Circle, Suite 800**
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☐ Change ☐ Addition
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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lidia Cartaya, VP 04/29/02 (305) 476-0955

Date

Daytime Phone #

CR2E034 (9/01)