2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000014759

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 APR 26 AM 9:15

1. Entity Name

FLORIDA INVESTMENT GROUP, INC.

Principal Place of Business	Mailing Address
2300 CORAL WAY SUITE # 200 MIAMI, FL 33145	2300 CORAL WAY SUITE # 200 MIAMI, FL 33145

DO NOT WRITE IN THIS SPACE

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 65-0404013 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES INC.
2300 CORAL WAY, SUITE # 200
MIAMI, FL 33145

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.

SIGNATURE _____ AMADA CANTERA LOPEZ, PRES. 4/20/00
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 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, 2000 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			**12.** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPT LOPEZ-CANTERA, AMADA 2300 CORAL WAY, SUITE 201 MIAMI, FL 33145	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 600003230666---8 -05/01/00--01020--010 ****150.00 ****150.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CARTAYA, LIDIA 1717 N. BAYSHORE DRIVE, SUITE 114 MIAMI, FL 33132	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 600003230666---8 -05/01/00--01020--011 ******8.75 ******8.75
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CR2E034 (9/99)

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: _____ 4/20/00
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL SIGNING (ENTER OFFICER OR DIRECTOR) AMADA LOPEZ-CANTERA. DIR; PRES; TES. Date Daytime Phone #