

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000014759

1. Entity Name
FLORIDA INVESTMENT GROUP, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAY -1 PM 3:06

Principal Place of Business Mailing Address

2300 Coral Way 2300 Coral Way
Suite # 200 Suite # 200
Miami, Fl 33145 Miami, Fl 33145

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
65-0404013 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES INC.
2300 Coral Way, Suite # 200
MIami, Fl 33145

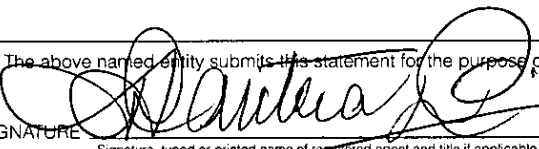
7. Name and Address of New Registered Agent

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, President** 4/20/01
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)

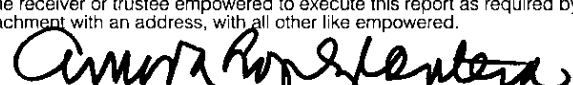
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS LOPEZ-CANTERA, AMADA 2300 Coral Way, Suite 201 Miami, Fl 33145 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CARTAYA, LIDIA 1717 N. Bayshore Drive, Ste 114 Miami, Fl 33132 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS LOPEZ-CANTERA, AMADA 2300 Coral Way, Suite 201 Miami, Fl 33145 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CARTAYA, LIDIA 1717 N. Bayshore Drive Ste. 208 Miami, Fl 33132 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS 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 all other like empowered.

SIGNATURE:  **AMADA CANTERA LOPEZ, President**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/01

CR2E034 (11/00)