

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90080 038 ***150.00

DOCUMENT # P93000000211

1. Corporation Name
CP INVESTMENTS OF MIAMI, INC.

Principal Place of Business
2850 DOUGLAS RD.
CORAL GABLES FL 33134

Mailing Address
2850 DOUGLAS RD.
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/04/1993

4. FEI Number
65-0377503

Applied For
Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 10200 SUNSET DR.

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 MIAMI, FL

28

Zip Country

Zip Country

24 33173 25 MIAMI - DADE

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARSTON, ELIZABETH J
2850 DOUGLAS RD.
CORAL GABLES FL 33134

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
10200 SUNSET DR.

83

84 City
MIAMI

85 Zip Code
FL 33173

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
CEO
SALADRIGAS, CARLOS A
STREET ADDRESS
2850 DOUGLAS RD.
CITY-ST-ZIP
CORAL GABLES FL 33134

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
10200 SUNSET DR.
1.4 CITY-ST-ZIP
MIAMI, FL 33173

TITLE ☐ DELETE

NAME
MARSTON, ELIZABETH J
STREET ADDRESS
2850 DOUGLAS RD.
CITY-ST-ZIP
CORAL GABLES FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
} SAME AS ABOVE

TITLE ☐ DELETE

NAME
PEREZ, MARTIN J.
STREET ADDRESS
2850 DOUGLAS RD.
CITY-ST-ZIP
CORAL GABLES FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
} SAME AS ABOVE

TITLE ☐ DELETE

NAME
AS
CUETO, WILLIAM
STREET ADDRESS
2850 DOUGLAS RD.
CITY-ST-ZIP
CORAL GABLES FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
} SAME AS ABOVE

TITLE ☐ DELETE

NAME
CFO
RODRIGUEZ, CARLOS A
STREET ADDRESS
2850 DOUGLAS ROAD
CITY-ST-ZIP
CORAL GABLES FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
} SAME AS ABOVE

TITLE ☒ DELETE

NAME
P
CARLEN, JOHN T
STREET ADDRESS
2850 DOUGLAS RD
CITY-ST-ZIP
CORAL GABLES FL 33134

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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

Date

Daytime Phone #

CR2E034 (1/98)