

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000078987

1. Entity Name

INTER-INVEST PROPERTIES, INC.

**FILED**  
**May 04, 2000 8:00 am**  
**Secretary of State**

05-04-2000 90156 028 \*\*\*150.00

Principal Place of Business

2318 N. BAY ROAD  
MIAMI BEACH FL 33140  
US

Mailing Address

2318 N. BAY ROAD  
MIAMI BEACH FL 33140-4261  
US

2. Principal Place of Business

121 E. BROWARD BLVD

3. Mailing Address

SAME

Suite, Apt. #, etc.

SUITE 200

Suite, Apt. #, etc.

City & State

FORT LAUDERDALE

City & State

Zip  
33301

Country  
USA

Zip

Country

4. FEI Number

65-0486092

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

KURTEN, LEONHARD  
2318 NORTH BAY ROAD  
MIAMI BEACH FL 33140

7. Name and Address of New Registered Agent

Name

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

121 E. BROWARD BLVD, SUITE 200

City

FORT LAUDERDALE

FL

Zip Code  
33301

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

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

TITLE PUTO ☐ Delete  
NAME KURTEN, LEONHARD  
STREET ADDRESS 2318 NORTH BAY ROAD  
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE S ☐ Delete  
NAME KURTEN, LEONIE  
STREET ADDRESS 2318 N. BAY ROAD  
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 121 E. BROWARD BLVD, SUITE 200  
CITY-ST-ZIP FORT LAUDERDALE, FL 33301

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 121 E. BROWARD BLVD, SUITE 200  
CITY-ST-ZIP FORT LAUDERDALE, FL 33301

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

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

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

TITLE ☐ Change ☐ Addition  
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 TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)