## FILED

## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9400000351

1. Entity Name

SIGNATURE:

PEMPI PROPERTY INVESTMENTS, INC.



03 DEC -2 PH 12: 48

SECRETICAL OF STATE TALLAH - SECE. FLORIDA

DO NOT WRITE IN THIS SPACE											·	
2. Principal Place of Business 2201 NW 30th Place Suite, Apt. #, etc.			22 Su	3. Mailing Address 2201 NW 30th Place Suite Apt. #, etc.				200025232332 12/04/0301027027 **1380.00 do not write in this space				
Suite A  City & State Pompano Beach, FL			Ci	Suite A City & State Pompano Beach, FL				4. FE	4. FEI Number 65-0510216 Applied For Not Applicable			
Zip 33069		Country USA	Zij 33	069	Count USA			5. Certificate of Status Desired   \$8.75 Additional Fee Required				
						Name		7. Name and Address of Current Registered Agent aldes-Fauli Corporate Services, Inc.				
DO NOT WRITE IN THIS SPACE							Street Address (P.O. Box Number is Not Acceptable)					
						777 South Flagler Drive, Suite 500 East						
,							st Pa	Palm Beach FL Zip Code 33401				
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. I am familiar with, and accept the obligations of registered agent.												
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required agent and title if applicable. (NOTE: Registered Agent signature required agent and title if applicable.)  January 1 - May 1 Fee is \$150.00  After May 1, Fee is \$550.00								rien reins	9. Election Campaign Financing		\$5.00 May Be	
Amended UBR is \$61.25 Make Check Payable to Florida Department of State											Added to Fees	
10.	DIRECT	ORS										
TITLE NAME STREET ADDRESS CITY-SI-ZIP	2201 NW SUIN PLACE, SUITE A						ET ADDRESS -ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V, T DHANANI, MEENAZ 2201 NW 30TH PLACE, SUITE A					E Et address -S1-Zip						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS					ET ADDRESS -ST-ZIP				. 2		
TITLE NAME STREET ADDRESS CITY-ST-ZIP									IN THIS SPA	CE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP												
TITLE NAME STREET ADDRESS CITY-ST-ZIP												

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Meenaz Dhanani, VP