

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000045646

1. Entity Name

PERCAN INVESTMENTS, INC.

FILED

Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90030 003 ***158.75

Principal Place of Business

9200 S DADELAND BLVD
STE #617
MIAMI FL 33156
US

Mailing Address

9200 S DADELAND BLVD
STE #617
MIAMI FL 33156-2714
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite 700

Suite, Apt. #, etc.

Suite 700

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0501398

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GREEN, JERRY
9200 S DADELAND BLVD SUITE 208
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

JERRY GREEN

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

9200 S Dadeland Blvd.

Suite 700.

City

Miami

FL

Zip Code

33156

8. The above named entity submits this

SIGNATURE

Signature, typed or printed name

9. This corporation is eligible to satisfy
Tax filing requirement and elects to
(See criteria on back)

registered office or registered agent, or both, in the State of Florida.

Registered Agent signature required when reinstating)

DATE

FEE IS \$150.00

Fee will be \$550.00
to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P
NAME FERNANDEZ, VICTOR M
STREET ADDRESS 9417 NW 54TH DORAL CIRCLE LANE
CITY-ST-ZIP MIAMI FL 33178 ☐ Delete

TITLE VP
NAME CANALES, GABRIEL
STREET ADDRESS 3014 SW 100 AVE
CITY-ST-ZIP MIAMI FL 33165 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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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 ☐ Change ☐ Addition

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

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

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NAME
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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:

VICTOR M. Fernandez, Pres. 4/13/00 305-463-8016
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)