## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P95000022101 May 06, 2000 8:00 am Secretary of State "LE GRAND INVESTMENT GROUP INC." 05-06-2000 90332 001 \*\*\*\*\*8.75 05-06-2000 90332 002 \*\*\*150.00 Principal Place of Business Mailing Address 1717 N BAYSHORE DR 1717 N BAYSHORE DR STE 114 STE 114 MIAMI FL 33132 MIAMI FL 33132-1196 2. Principal Place of Business 1717 N. Bayshore Dr. 3.\_Mailing Address 1717 N. Bayshore Dr. Suite, Apt. #, etc. Suite 208 Suite, Apt. #, etc. Suite 208 DO NOT WRITE IN THIS SPACE City & State Miami, FL City & State Applied For 4. FE! Number 65-0565673 Miami, FL Not Applicable Country\_ Country \$8.75 Additional 33T32 33<sup>™</sup>32 5. Certificate of Status Desired USA Fee Required USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Property Management, S&K S & K PROPERTY MANAGEMENT INC Street Address (P.O. Box Number is Not Acceptable) 1717 N. Bayshore Dr. 1717 N BAYSHORE DR STE 114 Suite 208 **MIAMI FL 33132** City **Miami** Zip Code 33132 8. The above negred entity, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lidia Cartaya, Vice President SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. PD ☐ Addition ☐ Delete TITLE ÞD. Buckreus, Gerti 717 N. Bayshore Dr., Suite 208 **BUCKREUS, GERTIE** NAME 1717 N BAYSHORE DR STE 114 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33132** CITY-ST-7IP Miami, FL 33132 T Change ☐ Addition Delete TITLE TITLE ٧S CARTAYA, LIDIA NAME NAME Cartaya, Lidia STREET ADDRESS 1717 N. Bayshore Dr., Suite 208 Miami, FL 33132 1717 N BAYSHORE DR STE 114 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33132 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZiP. CITY-ST-ZIP ☐ Change Addition □ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS

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 affachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE: Je dia Cartana Vice Vienelle

SIGNATURE AND TYPED OF PRINTED

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

4/27/W

305 577-3848

Daytime Phone #

☐ Change

Addition