

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 09, 2001 8:00 am**  
**Secretary of State**

02-09-2001 90112 018 \*\*\*150.00

**DOCUMENT # P95000082334**

1. Entity Name  
**C. GROUP OFFICE PARK, INC.**

Principal Place of Business <b>1260 NW 72ND AVENUE          MIAMI FL 33126</b>	Mailing Address <b>1260 NW 72ND AVENUE          MIAMI FL 33126</b>
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020833



DO NOT WRITE IN THIS SPACE

65-0632911

4. FEI Number ~~65-0632991~~

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**BRODIE, SIDNEY Z  
 7270 NW 12TH STREET  
 PENTHOUSE I  
 MIAMI FL 33126**

**7. Name and Address of New Registered Agent**

Name **JULIO CAPO**  
 Street Address (P.O. Box Number is Not Acceptable) **1260 NW 72 AVE**  
 City **MIAMI FL** Zip Code **33126**

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 **JULIO CAPO** DATE **2-7-01**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD GERARDO, CAPO</b> <b>1260 NW 72ND AVE</b> <b>MIAMI FL</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TSD -- P JULIO CAPO</b> <b>1260 NW 72ND AVE</b> <b>MIAMI FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: DATE **2-7-01** **305-592-4960**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **JULIO CAPO PRESIDENT** Daytime Phone #

CR2E034 (10/00)

01447

P95000082334

# C. GROUP OFFICE PARK, INC.

1260 N. W. 72 Ave. Miami, FL 33126 Phone: 305-592-4967 Fax: 305-592-4968

February 7, 2001

Division of Corporations  
Uniform Business Report Filings  
P. O. Box 1500  
Tallahassee, FL 32302-1500

Re: C. Group Office Park, Inc.- FEI Number: 65-0632911

Gentlemen:

Please note that our FEI Number has been corrected from 65-0632991 to 65-0632911, per the Internal Revenue Service.

Should you have any questions, or need additional information, do not hesitate to contact us.

Sincerely,



Julio C. Capó, President

JC/mog  
Enclosures