42001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9600004742		(02.	
1. Entity Name			FILED
SOUTHWEST THIRD STREET INVESTMENT, INC.			02 JAN -2 PH 1:48
Principal Place of Business	Mailing Address		SECRETARY OF STATE TALLAHASSEE, FLORIDA
126 N.W. 18 Court SAME Miami, Florida 33125			TALLAHASSEE, FLORIDA
2. Principal Place of Business 3	. Mailing Address		
126 N.W. 18th Court Suite, Apt. #, etc.	ourt SAME AS 2. Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State	Oite & Otata		A STILL I
City & State Miami, Florida	City & State	•	4. FEI Number Applied For 65 - 0638496 Not Applicable
Zip Country 33125	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Reg	istered Agent	Name	7. Name and Address of New Registered Agent
0007 0 ** 07:1 **			NCTSCO GODOY ddress (P.O. Box Number is Not Acceptable)
Coral Gables, Fl. 33145		106	N V 10.1 G
00101 000100, 11, 001.9		. 126 City	N.W. 18th Court Miami FL Zip Code 33125
8. The above named entity submits this statement for the	purpose of changing its r	eaistered office or	11141111
SIGNATURE Francisco Godoy 12-27-2001 Signature, typed or printegrature of registered agent and title if applicable. (NOTE: Registered Agent signature required when refinstating) DATE			

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After, MAY 1-200 Make Check Payable		50.00 Trust Fund Contribution Added to Fees
11. OFFICERS AND DIR	ECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	☐ Delete	TITLE NAME STREET ADDRESS	P/S/T/D → Addition FRANCISCO GODOY 126 N.W. 18th Court
CITY-ST-ZIP		CITY-ST-ZIP	Miami, Florida 33125
TITLE	☐ Delete	TITLE	Change Addition
NAME STREET ADDRESS CITY-ST-ZIP	1 :	NAME STREET ADDRESS CITY-ST-ZIP	0000047688205 -01/11/0201032022 ***1350.00_***1350.00
TITLE	Delete	, TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS		NAME STREET ADDRESS	DEMOTATERATED
CITY-ST-ZIP .		CITY-ST-ZIP TITLE	THE RESIDENCE TO A STATE OF THE PRODUCTION OF TH
NAME .	☐ Delete	NAME	Cominge Grande
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	·
TITLE	☐ Delete	TITLE	. Change Addition
NAME		NAME	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
TITLE		-	☐ Change ☐ Addition
NAME		I IIILF	
IMMILE	Delete	TITLE NAME	
STREET ADDRESS CITY-ST-ZIP	L Delete	1	

GNATURE:

Thereby destrict that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. Turther 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 abother like empowered.

FRANCISCO GODOY

President 12-27-2001 (305)

SIGNATURE: