

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Jul 07, 2000 8:00 am**
Secretary of State

07-07-2000 90008 011 ***150.00

DOCUMENT #

P96000056679

1. Entity Name

S.M.N. INVESTMENTS, INC.

Principal Place of Business

Mailing Address

MIAMI FL.

9737 NW 41 ST SUITE 174
MIAMI FL. 33178

00068040

2. Principal Place of Business

9737 NW 41 ST SUITE 174

Suite, Apt. #, etc.

MIAMI FL

City & State

3. Mailing Address

Suite, Apt. #, etc.

City & State

4. FEI Number

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

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

Zip

33178

Country

U.S.A

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

RHONDA MONTROYA

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6/27/00

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, 2000 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
AMED PAREDES
9737 NW 41 ST SUITE 174
MIAMI FL 33178 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/27/00

(305) 593 2588

C-32E034 (9/99)

Attachment
D# 096000056679
DW60040

TO: Division of corporations

From: S.M.N. INVESTMENTS INC.

Please be advise that the change of adress was made last year and for that reason we did not reseived this year form.

Last year a change the adress correctly.

Sorry for any inconvenience.

The correct adress is 9737 N.W. 41st. SUITE. 174 Miami Fl. 33178

Amed Paredes