2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000073211

Entity Name: MIAMI PROPERTY INVESTMENTS, INC.

FILED Feb 05, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11830 SW 112 AVE CIR MIAMI, FL 33176 US **Current Mailing Address: New Mailing Address:** 11830 SW 112 AVE CIR. MIAMI, FL 33176 **FEI Number:** FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHEVALLIER, CLIFFORD C 10240 S W 40TH STREET MIAMI, FL 33165 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SANTOS, RENATO Name: Name: 4131 S W 102ND COURT Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: Title: () Delete () Change () Addition Name: CHEVALLIER, CLIFFORD Name: 10240 S W 40TH STREET Address: Address: MIAMI, FL 33165 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition SANTOS, ESTHER Name: Name: 11830 SW 112 AVE CIR. Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: () Change () Addition CHEVALLIER, CLIFFORD Name: Name: Address: 10240 SW 40 STREET Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: Title: () Delete () Change () Addition CHEVALLIER, CLIFFORD Name: Name: 10240 SW 40 STREET Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: Title: () Delete Title: () Change () Addition CHEVALLIER, CLIFFORD Name: Name: 10240 SW 40 STREET Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33165

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ESTHER SANTOS D 02/05/2003