## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 11, 2001 8:00 am Secretary of State DOCUMENT # **P96000097368** DEMAR CAPITAL INVESTMENTS, INC. 04-11-2001 90083 031 \*\*\*150.00 Principal Place of Business Mailing Address 1172 S DIXIE HIGHWAY C/O RICHABDS. P.A. SUITE 481 2665 S BAYSHORE DRIVE, STE 703 UUU34262 MIAMI FL 33146 MIAMPFL 33133 1115 2. Principal Place of Business 3. Mailing Address One Southeast Third Avenue Suite Apt # etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 2130 City & State City & State 4. FEI Number Applied For 65-0729561 Miami, FL Not Applicable Zip Country 33131 Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COPROLITE CORPORATION WORLD CORPORATE SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2665 S. BAYSHORE DR ONE SOUTHEAST THIRD AVENUE SUITE 703 **SUITE 2130** MIAMI FL 33133 City MIAMI 8. The above named entity submits this sta nt for the purpose of changing its registered office or registered agent, or both, in the State of Florida. HOSIGENT SIGNATURE Signature, typed of printed name of se and title if applicable IOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE X7 Change ☐ Addition STATON, ALBERT H. III STATON, ALBERT H III NAME NAME 12, rue Guynemer STREET ADDRESS 79 MONCADA WAY STREET ADDRESS CITY-ST-7iP SAN RAFAEL CA 94901 CITY-ST-ZIP Paris, France 75006 TITLE ☐ Delete ☐ Addition STATON, LINDA A. STATON, LINDA A NAME 10 Edgéwater Drive, Lanai South STREET ADDRESS 10 EDGEWATER DRIVE, LANAI SOUTH STREET ADDRESS Coral Gables, FL 33133 CITY-ST-7IP **CORAL GABLES FL 33133** CITY-ST-ZIP TITLE ☐ Delete TITEF STATON, ALBERT H., JR. 8091 Los Pinos Blvd. Change Change X Addition NAME STATON, MARY JANE NAME STREET ADDRESS 8091 LAS PINOS BLVD STREET ADDRESS Coral Gables, FL 33143 CITY-ST-ZIP CITY-ST-ZIP **CORAL GABLES FL 33146** TITLE D۷ Delete TITLE X Change ☐ Addition STATON, STUART A. NAME STATON, STUART A 10 Edgewater Drive, Lanai South STREET ADDRESS 10 EDGEWATER DRIVE, #LANAI SOUTH STREET ADDRESS Coral Gables, FL 33133 CLTY-ST-ZIP CORAL GABLES FL 33133 CITY-ST-ZIP DP TITLE TITLE ☐ Delete STATON, CANDACE MCGREGOR X Change Addition NAME MCGREGOR STATON, CANDACE NAME 12, rrué Guynemer STREET ADDRESS 79 MONCADA WAY STREET ADDRESS Paris, France 75006 CITY-ST-ZIP SAN RAFAEL CA 94901 CITY-ST-ZIP TITLE ☐ Delete TITLE X Change ☐ Addition LOGAN, STEVE NAME LOGAN, STEVE NAME

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 gustee 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 a

STREET ADDRESS

CiTY-ST-ZIP

address, with all other like empowered.

9031 MEADOWLAWN DRIVE

**BRENTWOOD TN 37027** 

STREET ADDRESS

CiTY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

370**2**7

9158 Saddlebow Drive

Brentwood, TN

CR2E034 (10/00)