## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

P97000032135 1. Entity Name

FILED Sep 17, 2002 8:00 am Secretary of State 09-17-2002 90102 023 \*\*\*150.00

HEVCHRIS IN	ivestments,	1NC.	
DO NOT WRITE IN THIS SPACE			- ~ ~ 1 0
2. Principal Place of Business 607 HE 69 TH STR 607 HE 69 TH STR			
507 N€ 69TH STR  Suite, Apr. #, etc.	Sulte, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State MIAMI, FURIDA	MIAMI, FLORIDA		4. FEI Number Applied For Not Applicable
33138 Country U.S.A.	Zip 33/38 Cc	Ountry U.S.A	5. Certificate of Status Desired \$8.75 Additional Fee Required
DO NOT WRITE IN THIS SPACE		Name KuskuG WARI CHRISTOPHER D	
		Street Address (F	20. Box Number is Not Acceptable)
		MAM	
		City	FL ZipS%138
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			
9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  January 1 - May 1 Fee is \$150.0  After May 1, Fee is \$550.00  Amended UBR is \$61.25  Make Check Payable to Department o		e ls \$550.00 R is \$61.25	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
11. OFFICERS AND DIRECTORS			
007 130 041		l	CR2E034B (12/01)
TITLE  MAME  STREET ADDRESS  CITY-ST-ZIP  JTD  MUST KWA, JONAS,  607 HE 69 TR SAR  MIAMI, FL 33138	H s	ITLE IAME TREET ADDRESS ITY-ST-ZIP	CREE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N S	TTLE  AME  TREET ADDRESS  ITY-ST-ZIP	DO NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	N. S	ITLE AME TREET ADDRESS ITY-ST-ZIP	
13. I hereby certify that the information supplied with this filling 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 on an attachment with an address, with affordation.			

SIGNATURE:

OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

attachnierit 872278

## **NEVCHRIS INVESTMENTS INC**

607 NE 69<sup>th</sup> Street MIAMI, FL33138 TEL: 305 759 1017 FAX: 305 759 4163

09/09/02

Division of Corporations
Uniform Business Report Filings
P.O.Box 1500
Tallahassee, FL32302-1500

Dear Sir/Madam

RE: FEI # 65-0756545 (Document # P97000032135)

We would like to file for our Uniform Business Report for the year 2002.

We did not receive the 2002 UBR forms so we could file on time. This is because of the fact that we changed addresses from the one you have on file.

However, please note that our new addresses are as follows: -

Principal

11. JAN 19 19 19 1

607 NE 69<sup>th</sup> Street Miami, F 33138 Postal

607 NE 69<sup>th</sup> Street Miami, FL33138

We have attached a check in the amount of \$150.00 (#159)

Sincerely Yours,

Kwangwari, Christopher N