

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000093732

1. Entity Name

BE-RO INVESTMENT INC.

FILED

May 16, 2000 8:00 am  
Secretary of State

05-16-2000 90065 002 \*\*\*150.00

Principal Place of Business 3071 INLET DR FT. LAUDERDALE FL 33312	Mailing Address 3071 INLET DR FT. LAUDERDALE FL 33023-4266
---	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2860 Pershing St Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State Hollywood	City & State
Zip 33020	Country FL

4. FEI Number 65-0791237	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RODRIGUE, JACQUES 3071 INLET DR FT. LAUDERDALE FL 33312	7. Name and Address of New Registered Agent Name: Rodrigue Jacques Street Address (P.O. Box Number is Not Acceptable): 2860 Pershing St City: Hollywood FL Zip Code: 33020
--	--

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: JACQUES RODRIGUE PDG. (Signature, typed or printed name of registered agent and title if applicable) (NOT: Registered Agent signature required when reinstating)

DATE: 04-26-00

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and effects to do so. (See criteria on back) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
--	--	---

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDG RODRIGUE, JACQUES 3071 INLET DR FT. LAUDERDALE FL 33312 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D.G. Jacques Rodrigue 2860 Pershing St Hollywood FL 33020 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BERGERON, LINE 3071 INLET DR FT. LAUDERDALE FL 33312 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BERGERON LINE 2860 Pershing St Hollywood FL 33020 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: LINE BERGERON S Line Bergeron 04-26-00 (954) 923 9860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/99)