

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 18, 2001 8:00 am**
Secretary of State

04-18-2001 90047 018 ***150.00

DOCUMENT # P98000007268

1. Entity Name

THE AMERICAS REAL ESTATE INVESTMENTS INC.

Principal Place of Business

**77 PARK AVENUE
SUITE 3C
NEW YORK NY 10016**

Mailing Address

**77 PARK AVENUE
SUITE 3C
NEW YORK NY 10016****744034**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

100 N. Biscayne Blvd.

3. Mailing Address

100 N. Biscayne Blvd.

Suite, Apt. #, etc.

1407

Suite, Apt. #, etc.

1407

City & State

Miami, Florida

City & State

Miami, Florida

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

USA

Zip

Country

USA5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****LEXIS DOCUMENT SERVICES, INC.
3953 WW KELLEY RD
TALLAHASSEE FL 32311**

Name

**Land Developer SA, USA, Inc.
Street Address (P.O. Box Number is Not Acceptable)
100 N. Biscayne Blvd., Suite 1407**

City

MIAMI**FL**Zip Code
33131

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

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

3/29/019. 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, 2001 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****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE **D** ☒ Delete
NAME **BORSALINO, MONICA**
STREET ADDRESS **COAD DE LA PAZ, 219-2A**
CITY-ST-ZIP **CAPITAL FEDERAL-ARGENTINA 1426**TITLE **P/T/S/D** ☐ Change ☒ Addition
NAME **Carlos J. Molinari**
STREET ADDRESS **100 N. Biscayne Blvd., Suite 1407**
CITY-ST-ZIP **Miami, FL 33131**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
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NAME
STREET ADDRESS
CITY-ST-ZIP

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 #

3/29/01

CR2E034 (10/00)