

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000034649

1. Corporation Name

CALIPSO INVESTMENTS, INC.

Principal Place of Business	Mailing Address
2050 EAST OAKLAND PARK BLVD SUITE 209 FT LAUDERDALE FL 33306	2050 EAST OAKLAND PARK BLVD SUITE 209 FT LAUDERDALE FL 33306

## FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90056 025 \*\*\*150.00



FT LAUDERDALE FL 33306 FT LAUDERDALE FL 33306			DO NOT WRITE IN THI	S SPACE	
			3. Date Incorporated or Qualifed		
			04/16/1998		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26	1	65-0878595	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country	Zip Col	untry	This corporation owes the current year I Personal Property Tax.	ntangible □ Yes □ No	
9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Registered Agent		
		81 Name	<del>-</del>		
Young, P. Doug 2050 East Oakland Park BLVD Suite 209 Ft Lauderdale FL 33306		82 Street Address (P.O. Box Number is Not Acceptable)			
		83			
		84 City	F	L 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes, the a	above-named corpora	ation submits this statement for the purpose	of changing its registered	

office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE									
12,	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTO	RS IN 12				
TITLE	D DELETE	1.1 TITLE		Change	☐ Addition				
NAME	BRODY, JANETH	1.2 NAME							
STREET ADDRESS	2050 EAST OAKLAND PARK BLVD SUITE 209	1.3 STREET ADORESS							
CITY-ST-ZIP	FT LAUDERDALE FL 33306	1.4 CITY-ST-ZIP		<u> </u>	_				
TITLE	D DELETE	2.1 TITLE		Change	☐ Addition				
NAME	YOUNG, P. DOUG	2.2 NAME							
STREET ADDRESS	2050 EAST OAKLAND PARK BLVD SUITE 209	2.3 STREET ADORESS			Ì				
CITY-ST-ZIP	FT LAUDERDALE FL 33306	2.4 CITY-ST-ZIP							
TITLE	☐ DELETE	3.1 TITLE		☐ Change	Addition				
NAME		3 2 NAME							
STREET ADDRESS		3.3 STREET ADDRESS			,				
CITY-ST-ZIP		3.4. CITY-ST-ZIP			<u></u>				
TITLE	☐ DELETE	4.1 TITLE		☐ Change	☐ Addition				
NAME		4.2 NAME							
STREET ADDRESS		4.3 STREET ADDRESS							
CITY-\$T-ZIP		4.4 CITY-ST-ZIP							
TITLE	☐ DELETE	5.1 TITLE		Change	☐ Addition				
NAME		5.2 NAME							
STREET ADDRESS		5.3 STREET ADDRESS							
CITY-ST-ZIP		5.4 CITY-ST-ZIP							
TITLE	☐ DELETE	6.1 TITLE		Change	Addition				
NAME		6.2 NAME							
STREET ADDRESS		6.3 STREET ADDRESS			\				
CITY-ST-ZIP		6.4 CfTY-ST-ZIP							

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

