

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90450 032 ***150.00

DOCUMENT # P98000036570



1. Entity Name
AEP INVESTMENTS, INC.

Principal Place of Business
**C/O HENRY BATIEVSKY
19495 BISCAYNE BLVD. #600
AVENTURA FL 33180**

Mailing Address
**C/O HENRY BATIEVSKY
19495 BISCAYNE BLVD. #600
AVENTURA FL 33180**

2. Principal Place of Business
1680 MICHIGAN AVENUE

3. Mailing Address
1680 MICHIGAN AVENUE

Suite, Apt. #, etc.
SUITE 913

Suite, Apt. #, etc.
SUITE 913

City & State
MIAMI BEACH, FL

City & State
MIAMI BEACH, FL

Zip
33139

Country
USA

Zip
33139

Country
USA

4. FEI Number
65-0844888

Applied For
 Not Applicable

5. 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

**BATIEVSKY, HENRY
AMERICAN EQUITY PROPERTIES, INC.
19495 BISCAYNE BOULEVARD #600
AVENTURA FL 33180**

Name
HENRY BATIEVSKY

Street Address (P.O. Box Number is Not Acceptable)
**1680 MICHIGAN AVENUE
SUITE 913**

City
MIAMI BEACH FL Zip Code **33139**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

HENRY BATIEVSKY

4/9/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	BATIEVSKY, BERNARDO	
STREET ADDRESS	19495 BISCAYNE BLVD #600	
CITY-ST-ZIP	MIAMI FL 33180	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BATIEVSKY, HENRY	
STREET ADDRESS	19495 BISCAYNE BLVD #600	
CITY-ST-ZIP	MIAMI FL 33180	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **HENRY BATIEVSKY** 4/9/03 (305)933-9200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)