2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000043111

1. Entity Name

USA INVESTMENTS-MIAMI, CORP.

FILED
May 06, 2000 8:00 am
Secretary of State
05-06-2000 90321 001 ***150.00
05-06-2000 90321 002 *****8.75

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1717 N BAYSHORE DR STE 114 MIAMI FL 33132	1717 N BAYSHORE DR STE 114 MIAMI FL 33132-1196

2. Principal Place of Business		3. Mailing Address	
1717 N. Bayshore Dr.		1717 N. Bayshore Dr..	
Suite, Apt. #, etc.: Suite 208		Suite, Apt. #, etc.: Suite 208	
City & State: Miami, FL		City & State: Miami, FL	
Zip: 33132	Country: USA	Zip: 33132	Country: USA

4. FEI Number 65-0843594 ☐ 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
S& K PROPERTY MANAGEMENT INC 1717 N BAYSHORE DR STE 114 MIAMI FL 33132	Name: S&K Property Management, Inc. Street Address (P.O. Box Number is Not Acceptable): 1717 N. Bayshore Dr Suite 208 City: Miami, FL Zip Code: 33132

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] 4/27/00 Lidia Cartaya, Vice President
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. 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, 2000 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 NAME STREET ADDRESS CITY-ST-ZIP	PD BUCKREUS, GERTIE 1717 N BAYSHORE DR STE 114 MIAMI FL 33132	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Buckreus, Gerti 1717 N. Bayshore Dr., Sutie 208 Miami, FL 33132	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS CARTAYA, LIDIA 1717 N BAYSHORE DR STE 114 MIAMI FL 33132	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS Cartaya, Lidia 1717 N. Bayshore Dr., Suite 208 Miami, FL 33132	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

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: Lidia Cartaya Vice President 4/27/00 305 577-3885
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #