

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State

07-18-2001 90009 002 ***150.00

U1:34:3 AI

DOCUMENT # P98000046030
 1. Entity Name
BASIC INVESTMENT CORP.

Principal Place of Business Mailing Address
~~7508 38TH AVE S~~ PO BOX 2239
~~TAMPA FL 33169~~ BRANDON FL 33509
7910 RAFFIN WAY
RIVERVIEW, FL. 33



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
7910 RAFFIN WAY
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
RIVERVIEW, FL.

4. FEI Number Applied For
59-3512582 Not Applicable

Zip Country Zip Country
33569 **HILLSBOROUGH**

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DAMAN, RAFAEL
~~7508 38TH AVE S~~ **7910 RAFFIN WAY**
~~TAMPA FL 33169~~ **RIVERVIEW, FL. 33569**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (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 \$550.00
After September 12, 2001 Fee will be \$750.00
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	PSTD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAMAN, RAFAEL	NAME	
STREET ADDRESS	7508 38TH AVE S	STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33169	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS	7910 RAFFIN WAY	STREET ADDRESS	
CITY-ST-ZIP	RIVERVIEW, FL. 33569	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: Rafael Damán **SIGNATURE REQUIRED** 7-11-01 (813) 677-9278
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

Attachment

Doc. # PA8000046030

7-11-01

TO WHOM IT MAY CONCERN:

I NEVER RECEIVED MY FIRST NOTICE
FOR \$150.00 AND BEFORE I NOW I GOT
THIS FOR 550.00. I CALLED AND THEY
TOLD ME TO SEND THIS ONE AND A CHECK

FOR THE \$150.00

Stefan Danner