2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P98000054356** Mar 03, 2000 8:00 am **Secretary of State** H & A REAL PROPERTIES, INC. 03-03-2000 90039 028 ***150.00 Mailing Address Principal Place of Business 7415 SW 146TH COURT 7415 SW 146TH COURT MIAMI FL 33183-2932 MIAMI FL 33183 2. Principal Place of Business Mailing Address 331 Nadoura Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0843985 Not Applicable \$8.75 Additional 33134 Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent. 6. Name and Address of Current Registered Agent Name CAST, LOUIS F Street Address (P.O. Box Number is Not Acceptable) 10311 SW 56TH STREET MIAMI FL 33165 Zip Code 8. The above named entity submits this etatement 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) - FILE NOW!!!-FEE IS \$150.00 -- - --9.-This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition PTD TITLE TITLE Delete GONZALEZ, HUMBERTO M NAME NAME 7415 SW 146TH COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33183** ☐ Addition Change ☐ Delete TITLE TITLE SUMMERLIN, ANNA M NAME 7415.SW 146TH COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33183 ☐ Addition ☐ Change TITLE ☐ Delete TITLE: NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 333 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.

601218h2 PTD 2-18-2000 505-3869345