

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000070208

1. Entity Name

TCAV INVESTMENTS, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90041 022 ***150.00

Principal Place of Business

14425 COUNTRY WALK DRIVE
MIAMI FL 33186
US

Mailing Address

14425 COUNTRY WALK DRIVE
MIAMI FL 33186
US

644929



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0878443

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SCHUMER, KARL J
9400 S DADELAND BLVD
STE 600
MIAMI FL 33165

Name
KARL J. SCHUMER, ESQ.
Street Address (P.O. Box Number is Not Acceptable)
KARL J. SCHUMER, PA.
120 NE 179 STREET
City MIAMI FL Zip Code 33162-1017

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/10/2001

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, 2001 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 CARRILLO-GARCIA, PEDRO 14425 COUNTRY WALK DRIVE MIAMI FL 33186	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPD VALLEJO, JOSE 3740 N.W. 78TH STREET MIAMI FL 33147	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD GOLDRING, KENNETH 3740 N.W. 78TH STREET MIAMI FL 33147	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	AS SCHUMER, KARL J 9400 S DADELAND BLVD #600 MIAMI FL 33156	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	120 NE 179 STREET MIAMI, FL 33162-1017	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01 (305) 249-0687

Date

Daytime Phone #

CR2E034 (10/00)