

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000092020

1. Entity Name

MORZI INVESTMENT, INC.

**FILED**  
**Mar 07, 2000 8:00 am**  
**Secretary of State**

03-07-2000 90107 042 \*\*\*150.00

Principal Place of Business

Mailing Address

888 BRICKELL KEY DRIVE #2707  
MIAMI FL 33131

888 BRICKELL KEY DRIVE #2707  
MIAMI FL 33131-3504

2. Principal Place of Business

1401 Brickell Ave

3. Mailing Address

1401 Brickell Ave

Suite, Apt. #, etc.

Ste 1100

Suite, Apt. #, etc.

Ste 1100

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33131

Country

USA

Zip

33131

Country

USA

4. FEI Number

65-0882520

Applied For

Not Applicable

5. Certificate or Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOLLINGSWORTH, SCOTT  
888 BRICKELL KEY DRIVE #2707  
MIAMI FL 33131

Name

Scott Hollingsworth

Street Address (P.O. Box Number is Not Acceptable)

1401 Brickell Ave

Ste 1100

City

MIAMI

FL

Zip Code

33131

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

Scott Hollingsworth

(NOTE: Registered Agent signature required when reinstating)

DATE

3-4-2000

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 P  
NAME HOLLINGSWORTH, SCOTT  
STREET ADDRESS 888 BRICKELL KEY DR  
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1401 Brickell Ave, Ste 1100  
CITY-ST-ZIP MIAMI FL 33131

TITLE S  
NAME DE HOLLINGSWORTH, MARIA  
STREET ADDRESS 888 BRICKELL KEY DR #2707  
CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1401 BRICKELL AVE Ste 1100  
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-2000

Date

305 3732519

Daytime Phone #

CR2E034 (9/99)