

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000103790

1. Entity Name

HARLEY INVESTMENTS INC.

FILED
Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90034 049 ***158.75

Principal Place of Business
255 ALHAMBRA CIRCLE
SUITE #425
CORAL GABLES, FL. 33134

Mailing Address
255 ALHAMBRA CIRCLE
SUITE #425
CORAL GABLES, FL 33134

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
2121 PONCE DE LEON BLVD.
Suite, Apt. #, etc.
SUITE #240

City & State
CORAL GABLES, FL.

Zip
33134

Country
U.S.A.

4. FEI Number
65-0898713

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GILBERT CONTRERAS
255 ALHAMBRA CIRCLE
SUITE #425
CORAL GABLES, FL. 33134

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

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. ☐

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D. ARTURO ALVAREZ ☒ Delete
1401 PONCE DE LEON SUITE #401
CORAL GABLES, FL 33134

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D. GILBERT CONTRERAS ☐ Delete
255 ALHAMBRA CIRCLE, STE. #425
CORAL GABLES, FL. 33134

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D. P. HERNAN YEPES ☐ Change ☒ Addition
2121 PONCE DE LEON BLVD. SUITE #240
CORAL GABLES, FL. 33134

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ 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

Date

Daytime Phone #

CR2E034 (11/00)