

2000 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED

Apr 25, 2000 8:00 am
Secretary of State

04-11-2000 90019 002 ***150.00

DOCUMENT # P99000000742

1. Entity Name
D.G. INVESTMENTS GROUP, INC.

Principal Place of Business

**800 BRICKELL AVE.,STE.902
MIAMI FL 33131**

Mailing Address

**800 BRICKELL AVE.,STE.902
MIAMI FL 33131-2966**

2. Principal Place of Business

1401 Brickell Ave

Suite, Apt. #, etc.

Suite 700

City & State

Miami Florida

Zip

33131 USA

3. Mailing Address

1401 Brickell Ave

Suite, Apt. #, etc.

Suite 700

City & State

Miami FL

Zip

33131 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

05-0884464

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WALDMAN, GLEN H ESQ.
800 BRICKELL AVE.,STE.902
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name **Waldman, Glen H. Esq.**

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

1401 Brickell Ave

Suite 700

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.

(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 \$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

TITLE **DP**
NAME **GUY, DAVID**
STREET ADDRESS **800 BRICKELL AVE.,STE.902**
CITY-ST-ZIP **MIAMI FL 33131**

☐ Delete

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP**
NAME **Guy, David**
STREET ADDRESS **1401 Brickell Ave, Suite 700**
CITY-ST-ZIP **Miami FL 33131**

☒ Change ☐ Addition

TITLE
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☐ 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 (9/99)