2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

FILED Apr 27, 2001 8:00 am Secretary of State DOCUMENT # **P99000010031** OREEF INVESTMENTS, INC. 04-27-2001 90370 049 ***150.00 Principal Place of Business Mailing Address 1221 BRICKELL AVE., STE. 1020 1221 BRICKELL AVE., STE. 1020 MIAMI FL 33131 **MIAMI FL 33131** 2. Principal Place of Business 11st Street 6302 SW 41st Street Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0896559 PORIDA Not Applicable Country DADE \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Guerrieri ANIEL SAMMARCO, VINCENT T ESQ. Street Address (P.O. Box Number is Not Acceptable) 7752 TAFT ST. PEMBROKE PINES FL 33024 Street 8. The above named entity submit withis statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE NAME **GUERRIERI, DANIEL** NAME STREET ADDRESS 1221 BRICKELL AVE., STE: 1020 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI-FL-33131-☐ Delete TITLE GUERRIERI. ELIZABETH NAME NAME STREET ADDRESS -1221 BRICKELL AVE., STE. 1020 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 --☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP TITLE Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY- ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.