

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000027357

FILED  
Jan 09, 2003  
Secretary of State

**Entity Name:** MASARI INVESTMENTS CORPORATION

**Current Principal Place of Business:**

5050 SW 35 TERRACE  
FORT LAUDERDALE, FL 33312

**New Principal Place of Business:**

**Current Mailing Address:**

5050 SW 35 TERRACE  
FORT LAUDERDALE, FL 33312

**New Mailing Address:**

**FEI Number:** 59-3566008

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SARAGA, MATEAS  
5050 SW 35 TERRACE  
FORT LAUDERDALE, FL 33312 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SARAGA, MATEAS  
Address: 5050 SW 35 TERR  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VD ( ) Delete  
Name: SARAGA, ARIE  
Address: 5002 SW 35 TERR  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: DTS ( ) Delete  
Name: SARAGA, MOISES  
Address: 5026 SW 35 TERR  
City-St-Zip: FORT LAUDERDALE, FL 33312

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATEAS SARAGA

PD

01/09/2003

Electronic Signature of Signing Officer or Director

Date