2001 UNIFORM BUSINESS REPORT (UBR)

Feb 20, 2001 8:00 am Secretary of State P99000037906 **DOCUMENT#** 1. Entity Name Commercial Real Estate Investment Group, Inc. 02-20-2001 90062 005 ***150.00 Principal Place of Business Mailing Address 715-755 S.W. 17th Avenue 8211 West Broward Blvd. Suite 200 Delray Beach, FL 33444 ADD25096 Plantation, FL 33324 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 65-0914060 Country Country Zip \$8.75 Additional Zip Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name David Torchin, C.P.A. Street Address (P.O. Box Number is Not Acceptable) 8211 West Broward Blvd. Suite 200 Zip Code City Plantation EL statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida The above named entity s David Torchin, C.P.A. SIGNATURE nature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE President/Director MAME Donato Walter Casale STREET ADDRESS STREET ADDRESS 750 S.W. 17th Avenue CITY-ST-ZIP CITY-ST-ZIP Delray-Beach, FL-33444 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Addition Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ng does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 13. I hereby certify that the information supplied v

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SIGNATURE: Donato Walter CASALE, 2/2/01

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accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

indicated on this report or supplemen

of the corporation or the receiver or changed, or on an attachment with il repç