AMENDED

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000050323

1. Entity Name

SIGNATURE

LANDINGS OF INVERRARY INVESTMENTS, INC.



FILE

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SECRETARY OF STATE TALLAHASSLE, FLORIDA

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2. Principal Place of Business		3. Mailing Address			1 400025232374	
2201 NW 30th Place			th Place	12/04/030102702	_ 12/04/0301027027 **1380.00	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN TH	DO NOT WRITE IN THIS SPACE	
Suite A		Suite A		i		
City & State		City & State		4. FEI Number	Applied For	
Pompano Beach, FL		Pompano Beach, FL		59-3579744	Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional	
33069	USA	33069	USA	3. Certificate of Status Desired	Fee Required	

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent						
Name Valdes-Fauli Corpora	ate Services, Inc.					
Street Address (P.O. Box Number is Not Acce	eptable)					
777 South Flagler Drive,	Suite 500 East					
City West Dalm Beach	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. I am familiar with, and accept the obligations of registered agent.

Signature, typed or printed name of requisitered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaiting) DATE				
· ;	nuary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Payable to Florida Department of State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V Alnajjar, Nader 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P Chaleff, Lawrence N. 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V, T, AS Clark, Susan I. 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V, S Dhanani, Meenaz 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V Lal, Sanjay 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V Shetty, Dayanand 2201 NW 30th Place, Suite A Pompano Beach, FL 33069	TITLE NAME STREET ADDRESS CITY-ST-ZIP		

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Meenaz Dhanani, VP/Sec.

11/21/03

(407) 239-9142

Daytime Phone #