

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

04-24-2001 90238 042 ***150.00

DOCUMENT # P99000052879

1. Entity Name

CAPITAL INVESTMENT SERVICES, INC.

Principal Place of Business

Mailing Address

800 DOUGLAS RD.
 STE 240
 MIAMI FL 33134

800 DOUGLAS RD.
 STE 240
 MIAMI FL 33134

44120



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Coral Gables FL

Coral Gables

Zip

Country

Zip

Country

33134

33134

4. FEI Number

65-0926091

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MIAMI CORPORATE SYSTEMS, INC.
 5200 BLUE LAGOON DRIVE
 SUITE 700
 MIAMI FL 33126

Name

Robert S. Escobio

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

4101 Alhambra Circle

City

Coral Gables

FL

Zip Code

33134

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

[Signature]

Robert S. Escobio

4/18/01

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME D
 STREET ADDRESS ESCOBIO, ROBERT J
 CITY-ST-ZIP 5200 BLUE LAGOON DRIVE SUITE 700
 MIAMI FL 33126

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 800 Douglas Rd, Suite 240
 CITY-ST-ZIP Coral Gables, FL 33134

TITLE ☐ Delete
 NAME D
 STREET ADDRESS ESCOBIO, SUSAN M
 CITY-ST-ZIP 5200 BLUE LAGOON DRIVE SUITE 700
 MIAMI FL 33126

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 800 Douglas Rd, Suite 240
 CITY-ST-ZIP Coral Gables, FL 33134

TITLE ☒ Delete
 NAME D
 STREET ADDRESS BEHAR, HOWARD R
 CITY-ST-ZIP 5200 BLUE LAGOON DRIVE SUITE 700
 MIAMI FL 33126

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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.

[Signature]

Robert S. Escobio