

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90076 004 ***158.75

DOCUMENT # P99000068835

1. Entity Name
FIRST UNION REALTY INVESTMENTS CORP.

Principal Place of Business Mailing Address
5500 COLLINS AVE., APT. 1401 **5500 COLLINS AVE., APT. 1401**
MIAMI BEACH FL 33140 **MIAMI BEACH FL 33140-2501**

2. Principal Place of Business, 3. Mailing Address
5500 COLLINS AVE **5500 COLLINS AVE**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
#1401 **#1401**
 City & State City & State
MIAMI BEACH **MIAMI BEACH**



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
125-0972306 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
EXPOSITO, SIGMUND Name **Exposito Sigmund**
5500 COLLINS AVE., APT. 1401 Street Address (P.O. Box Number is Not Acceptable) **5500 COLLINS AVE #1401**
MIAMI BEACH FL 33140 City **MIAMI BEACH** FL Zip Code **33140**

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 DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
 After MAY 1, 2000 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. PREVIOUS OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SIGMUND EXPOSITO 5500 COLLINS AVE #1401 MB, FLA 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY TREASURER ANA J. EXPOSITO 5500 COLLINS AVE #1401 MB FLA 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY TREASURER ANA J. EXPOSITO 5500 COLLINS AVE MB FLA 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESD SIGMUND EXPOSITO 5500 COLLINS AVE #1401 MB FLA 33140
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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: **Sigmund Exposito** Date **4/11/2000** Daytime Phone # **305 975-7585**

CR2E034 (9/99)