

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000081684

1. Entity Name

THE MCDONNOUGH'S INVESTMENT GROUP, INCORPORATED

FILED
Mar 30, 2001 8:00 am
Secretary of State

03-06-2001 90288 038 ***150.00

33548



DO NOT WRITE IN THIS SPACE

Principal Place of Business KENDALL VILLAGE CENTER 8703 SW 124TH AVE. MIAMI FL 33183	Mailing Address 10224 SW 139TH PLACE MIAMI FL 33186
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2. Principal Place of Business West Bird Shopping Center Suite, Apt. #, etc. 11423 S.W. 40th St #33	3. Mailing Address Suite, Apt. #, etc.
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City & State Miami, FL	City & State
Zip 33165	Country U.S.A.

4. FEI Number 65-1004680	APPLIED FOR	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MCDONNOUGH, RUDYARD 10224 SW 139TH PLACE MIAMI FL 33186
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 one if applicable. (NOTE: Registered Agent signature required when revisiting)
DATE _____

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
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11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD MCDONNOUGH, RUDYARD 10224 SW 139TH PLACE MIAMI FL 33186 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPSD MCDONNOUGH, RICHARD W 10224 SW 139TH PLACE MIAMI FL 33186 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPD MCDONNOUGH, RUDYARD JR 14321 SW 88TH STREET APT F202 MIAMI FL 33186 ☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition

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: <i>[Signature]</i>	3/1/01 (305) 653-1135
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CR2004 (10/00)