

May 21, 2001 8:00 am
Secretary of State

05-21-2001 90363 019 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000082186**Entity Name
YKEMA INTERNATIONAL INVESTMENTS, INC.

Principal Place of Business

**NW 41ST ST.
MI FL 33178**

Mailing Address

**9572 NW 41ST ST.
MIAMI FL 33178**

ADD 010932

Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

A. FEEL Number **65-0049573**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate or Status Desired

☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**CAMPO, YESIT J
9572 NW 41ST ST.
MIAMI FL 33178****7. Name and Address of New Registered Agent**

Name

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

City

FL

Zip Code

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 (Print or Print Name of registered agent and title if applicable)

(2015 Registered Agent signature required when re-registering)

DATE

1. 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****1. OFFICERS AND DIRECTORS**

TITLE	PSD	☐ Delete
NAME	VELASQUEZ MORALES, JORGE IVAN	
STREET ADDRESS	9572 NW 41ST ST.	
CITY-STATE-ZIP	MIAMI FL 33178	
TITLE	VD	☐ Delete
NAME	VELASQUEZ-SALGADO, ALEXANDRA	
STREET ADDRESS	9572 NW 41ST ST.	
CITY-STATE-ZIP	MIAMI FL 33178	
TITLE	TD	☐ Delete
NAME	SALGADO, BLANCA LILIA	
STREET ADDRESS	9572 NW 41ST ST.	
CITY-STATE-ZIP	MIAMI FL 33178	
TITLE	D	☐ Delete
NAME	VELASQUEZ SALGADO, JORGE LEONARDO	
STREET ADDRESS	9572 NW 41ST ST.	
CITY-STATE-ZIP	MIAMI FL 33178	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119, 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. 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 I am duly sworn according to Book 11, or Book 12, changed, or on an attachment with an address, with all other like empowers.

SIGNATURE: X