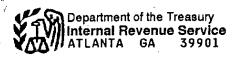
## "2002 UNIFORM BUSINESS REPORT (UBR)

S!GNATURE:

## FiltD § Experimental Secretary of State 32-27-2002 20040 2111 **DOCUMENT #** P99000086841 1. Entity Name TANGIBLE INVESTMENTS 1, INC. Principal Place of Business Mailing Address C/O ANTHONY ROBLEDO C/O ANTHONY ROBLEDO 8180 NW 36 STREET. #100 8180 NW 36 STREET. #100 MIAMI FL 33166 **MIAMI FL 33166** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State see attached 4. FEI Number Applied For 0951808 65-095355 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROBLEDO, ANTHONY Street Address (P.O. Box Number is Not Acceptable) 8180 NW 36TH STREET, #100 MIAMI FL 33166 City Zip Code FL 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 -10: Election: Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Change ☐ Delete TITLE ☐ Addition ACEBO, PEDRO L NAME NAME 215 E. 15TH ST STREET ADDRESS STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 true empowered to execute this port as equired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with

Date

Daytime Phone #



7

Date of this notice: Taxpayer Identifying Number Form: 2363

FEB. 14, 2000 65-0953554

Tax Period:

.#\$

For assistance you may call us at:

1-800-829-1040

Or you may write to us at the address shown at the left. If you write, be sure to attach the bottom part of this notice.

Hallalla Haralla India India

TANGIBLE: INVESTMENTS 1 INC % ANTHONY ROBLEDO 8180 NW 36 ST 100 MIAMI FL 33166-6650257

## **EIN ASSIGNED IN ERROR**

OUR RECORDS INDICATE WE HAVE INCORRECTLY ASSIGNED MORE THAN ONE EMPLOYER IDENTIFICATION NUMBER TO YOU. THE NUMBER SHOWN ABOVE IS YOUR CORRECT ONE. THE FOLLOWING NUMBER HAS BEEN INCORRECTLY ASSIGNED:

WE WILL TRANSFER ANY PAYMENTS OR RETURNS TO YOUR ACCOUNT UNDER THE CORRECT EMPLOYER IDENTIFICATION NUMBER.

PLEASE USE THE CORRECT NUMBER AND ACCOUNT NAME, EXACTLY AS SHOWN ABOVE, ON BUSINESS TAX RETURNS, PAYMENTS, PAYMENTS MADE ELECTRONICALLY, AND RELATED CORRESPONDENCE.

PLEASE DESTROY ANY FEDERAL TAX DEPOSIT COUPON BOOKS THAT SHOW THE INCORRECT EMPLOYER IDENTIFICATION NUMBER.

IF YOU DEPOSIT ELECTRONICALLY, PLEASE VERIFY THAT YOUR EIN IS CORRECT BEFORE MAKING YOUR DEPOSIT WITH THE FINANCIAL INSTITUTION DESIGNATED TO PROCESS YOUR ELECTRONIC FUNDS TRANSFER (EFT) TAX PAYMENTS.

WE APOLOGIZE FOR ANY INCONVENIENCE WE MAY HAVE CAUSED YOU, AND THANK YOU FOR YOUR COOPERATION.



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To make sure that IHS employees give	courteous responses and correct information to taxpayers, a second IRS employee sometimes listens in on	
telephone calls.	Overlay 5 Form 8489 (	(Rev.8-91)
Keep this part for your record	8	

Return this part to us with your check or inquiry

Your telephone number

Best time to call

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