2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P99000098787** Feb 28, 2000 8:00 am Secretary of State LANFER INVESTMENTS, INC. 02-28-2000 90016 031 ***150.00 Principal Place of Business Mailing Address 7951 SOUTHWEST 6TH STREET 7951 SOUTHWEST 6TH STREET SUITE 108 SUITE 108 PLANTATION FL 33324 PLANTATION FL 33324-3211 3. Mailing Address 2. Principal Place of Business 2565 NW 874 DRIVE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State Spring, FlorisA CORAL Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required BSA 33 O6*5* 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MESA, MANUEL ARTHUR ESQ. Street Address (P.O. Box Number is Not Acceptable) 37TH FLOOR, NATIONSBANK TOWER 100 SOUTHEAST 2ND STREET **MIAMI FL 33131** Zip Code 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Change ☐ Addition D Delete TITLE

NAME STREET ADDRESS CITY-ST-ZIP	FERNANDEZ, CARLOS E 7951 SOUTHWEST 6TH STREET SUITE 108 PLANTATION FL 33324	NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete LANDA, RAFAEL I 7951 SOUTHWEST 6TH STREET SUITE 108 PLANTATION FL 33324	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete LANDA, GUILLERMO J 7951 SOUTHWEST 6TH STREET SUITE 108 PLANTATION FL 33324	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-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

u thousand.

GuillERMO LANDA

02 04-00

954-476-1822

Date

Daytime Phone #