

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000099800

1. Entity Name

NEW LAND INVESTMENT, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90042 032 ***150.00

Principal Place of Business 4190 SW 74TH COURT MIAMI FL 33155	Mailing Address 4190 SW 74TH COURT MIAMI FL 33155-4414
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2. Principal Place of Business 10815 NW 33 ST. Suite, Apt. #, etc.	3. Mailing Address 10815 NW 33 ST. Suite, Apt. #, etc.
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City & State MIAMI, FL	City & State MIAMI, FL
Zip 33172	Zip 33172
Country USA	Country USA

4. FEI Number 65-0962629	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SANCHEZ, HERNANDO R 4190 SW 74TH COURT MIAMI FL 33155
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7. Name and Address of New Registered Agent Name: HERNANDO RAMIREZ, SR Street Address (P.O. Box Number is Not Acceptable): 10815 NW 33 ST. City: MIAMI FL Zip Code: 33172
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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: <i>[Signature]</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: 5/1/00
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9. This corporation is eligible to satisfy its Intangible Tax filing requirements and elects to do so. (See criteria on back) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SANCHEZ, HERNANDO R 4190 SW 74TH COURT MIAMI FL 33155 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD BAEZ, HERNANDO R 4190 SW 74TH COURT MIAMI FL 33155 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RAMIREZ, DANIEL 4190 SW 74TH COURT MIAMI FL 33155 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERNANDO RAMIREZ, SR. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10815 NW 33 ST. MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD HERNANDO RAMIREZ, JR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10815 NW 33 ST. MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DANIEL RAMIREZ <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10815 NW 33 ST. MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 another like empowered.

SIGNATURE: <i>[Signature]</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR HERNANDO RAMIREZ, JR	Date: 5/1/00 Deputy Phone #: (305) 468-0092
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CR2E034 (9/99)