## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED May 02, 2000 8:00 am Secretary of State **DOCUMENT # \$81600** 1. Entity Name PIPWOOD INVESTMENTS, INC. 05-02-2000 90107 037 \*\*\*150.00 Mailing Address Principal Place of Business 701 BRICKELL AVENUE 701 BRICKELL AVENUE SUITE 1600 (RFH) SUITE 850 MIAMI FL 33131-2822 MIAMI FL 33131 3. Mailing Address 2. Principal Place of Business Suite Apt #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0291642 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SULLIVAN, JOHN S Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVENUE SUITE 850 **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 . (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change TITLE TITLE Delete DST SULLIVAN, JOHN S NAME DE OTADUY, JAVIER NAME Le Casa Bianca, Bla. 3ET. N3, 17 Blvd. du Larvotto 701 BRICKELL AVENUE, SUITE 850 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 98000 Montecarlo, Monaco CITY-ST-ZIP MIAMI FL 33131 ☐ Change Delete TITLE TITLE SULLIVAN, JOHN S TAMURA, TSUNEHIKO NAME NAME Paseo Marquesa Viuda de Aldama no. 15, La Moraleja 701 BRICKELL AVENUE, SUITE 850 STREET ADDRESS STREET ADDRESS 28100 Alcobendas (Madrid) CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131. Change ☐ Addition Delete TITLE TITLE SULLIVAN, JOHN S NAME 701 BRICKELL AVE. STE 850 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33131** CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

NAME

⊣Javier <u>de Otaduy</u> TED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

Change

☐ Addition