

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 05, 2002 8:00 am**  
**Secretary of State**

03-05-2002 90062 034 \*\*\*150.00

**DOCUMENT # V10393**

1. Entity Name

**NORTH AMERICA INVESTMENTS, INC.**

Principal Place of Business

**4099 TAMiami TRAIL NORTH  
 SUITE 400  
 NAPLES FL 34103  
 US**

Mailing Address

**4099 TAMiami TRAIL NORTH  
 SUITE 400  
 NAPLES FL 34103  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0309630**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STARMAN, SHELDON W.  
 4099 TAMiami TRAIL NORTH  
 SUITE 400  
 NAPLES FL 34103**

Name

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

City

**FL**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. 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, 2002 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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PSTD STARMAN, SHELDON W. 4099 TAMiami TRAIL N. NAPLES FL 34103</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V BUDD, DAVID G 3033 RIVIERA DRIVE, SUITE 201 NAPLES FL 34103</b>	<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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD Riste Gusterov 3033 Riviera Drive, Suite 201 Naples, FL 34103</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VT Gligor Tuparov 3033 Riviera Drive, Suite 201 Naples, FL 34103</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AVS Lou Vlasho 3033 Riviera Drive, Suite 201 Naples, FL 34103</b>	<input type="checkbox"/> Change <input checked="" 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 all other like empowered.

SIGNATURE:

*David G. Budd*  
**DAVID G. BUDD, Assistant Secretary**

2/5/02

Date

(941) 263-7700

Daytime Phone #

CR2E034 (9/01)

**Attachment #V10393**

**BUDD AND BENNETT**

328617

**Attorneys at Law**

**Telephone: (941) 263-7700**

**3033 Riviera Drive, Suite 201**

**Facsimile : (941) 263-0998**

**Naples, Florida 34103**

**E-Mail Address: BUDD BENNETT@aol.com**

**David G. Budd, P.A.  
FL & OH BAR**

**Richard K. Bennett  
FL BAR**

February 5, 2002

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

RE: North America Investments, Inc.  
FEIN 65-0309630  
Our File No.: 370/2

Dear Sirs:

Enclosed find 2002 Uniform Business Report for the above corporation, together with check in payment of the \$150.00 filing fee.

Thank you.

Sincerely,

  
David G. Budd

Enclosures

dgb/cmf/forms/UBR letter - North America