

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2003 8:00 am
Secretary of State

03-06-2003 90001 044 ****50.00

DOCUMENT # L00000000196

1. Entity Name

GEORGE T. RAMANI & ASSOCIATES, P.L.



Principal Place of Business

Mailing Address

**200 S. BISCAYNE BLVD.
MIAMI FL 33131**

**200 S. BISCAYNE BLVD.
MIAMI FL 33131**

2. Principal Place of Business

3. Mailing Address

80 S.W. 8 STREET

P.O. Box 11-3237

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3100

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33130

Country

USA

Zip

33111-3237

Country

USA

4. FEI Number

65-0970784

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**RAMANI, GEORGE T
200 S. BISCAYNE BLVD.
SUITE 2000
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name

GEORGE T. RAMANI

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

80 S.W. 8 STREET

SUITE 3100

City

MIAMI

FL

Zip Code

33130

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
RAMANI, GEORGE T
200 S. BISCAYNE BLVD.
MIAMI FL 33131** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
GEORGE T. RAMANI
80 S.W. 8 St. SUITE 3100
MIAMI FL 33130** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

GEORGE T. RAMANI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/3/03 305-381-8811
Date Daytime Phone #

CR2E083 (10/02)

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