

2001 UNIFORM BUSINESS REPORT (UBR)

0003182

DOCUMENT # L00000002149

1. Entity Name

BPC INVESTMENTS, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 SEP 28 PM 2:10

Principal Place of Business

11734 S.W. 134TH COURT
MIAMI FL 33186-4420

Mailing Address

P.O. BOX 162212
MIAMI FL 33116-2212

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

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GONZALEZ, BERNARDO H
11734 S.W. 134TH COURT
MIAMI FL 33186-4420

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By September 26, 2001

BLT

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE *President / Secretary* ☐ Delete
NAME *Bernardo Gonzalez*
STREET ADDRESS *11734 SW 134th Court*
CITY-ST-ZIP *Miami, FL 33186-4420*

TITLE *President / Secretary* ☐ Change ☒ Addition
NAME *Bernardo Gonzalez*
STREET ADDRESS *11734 SW 134th Court*
CITY-ST-ZIP *MIAMI, FL 33186-4420*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
700004619257-4
-10/02/01--01002--001
*******50.00 *****50.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Bernardo Gonzalez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

09-25-01 (305) 385-7274

CR2E083 (5/01)