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2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

04-30-2002 90119 023 ****50.00

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DOCUMENT # L00000005936

1. Entity Name
TECVENAM L.C.

Principal Place of Business	Mailing Address
13380 SW 131 ST. #122 MIAMI FL 33186	13380 SW 131 ST. #122 MIAMI FL 33186

2. Principal Place of Business	3. Mailing Address
8209 NW 66 St.	8209 NW 66 St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, FL.	City & State: Miami, FL.
Zip: 33166 Country: USA	Zip: 33166 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1015896 APPLIED FOR — 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
FELDENKRAIS, MICHAEL 290 NW 165 STREET, PLAZA 100 MIAMI FL 33169	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 _____ 2/20/02
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 May 1, 2002

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE	MGRP ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	PRIETO, HAROLD	NAME	
STREET ADDRESS	14672 SW 160 CT	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33196	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	PERICCHI, JUAN A	NAME	
STREET ADDRESS	13380 SW 131 ST. #122	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MONTENEGRO, PEDRO V	NAME	
STREET ADDRESS	13380 SW 131 ST #122	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	VALEIRO, MARIA A	NAME	
STREET ADDRESS	13380 SW 131 ST. #122	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	BATISTA, JOSE D	NAME	
STREET ADDRESS	13380 SW 131 ST. #122	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E083 (9/01)

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: SIGNATURE REQUIRED 2/20/02 305.629.9304
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #