



FILED
Mar 31, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000006716			
1. Entity Name ESG AMERICA, L.L.C.		Secretary of State	
Principal Place of Business 1500 SAN REMO AVE. SUITE 203 CORAL GABLES, FL 33146		Mailing Address 1500 SAN REMO AVE. SUITE 203 CORAL GABLES, FL 33146	
DO NOT WRITE IN THIS SPACE			
		01222004No Chg-LLC CR2E083 (10/03)	
		4. FEI Number 65-1073728 Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent SCHIFFIN, MICHAEL TWO DATRAN CENTER STE 1109 MIAMI, FL 33156		DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
Filing Fee is \$50.00 Due by May 1, 2004		UD00000095740 03/31/04-80018-017 50.00	
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOOTH, PETER M 1500 SAN REMO AVE, SUITE 203 CORAL GABLES, FL 33146		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR PIRO, MARIA LAUREN 1500 SAN REMO AVE, SUITE 203 CORAL GABLES, FL 33146		
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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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		3/29/04 305 665-0813 <small>Date Daytime Phone #</small>	