


**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 23, 2003 8:00 am**  
**Secretary of State**

06-23-2003 90001 033 \*\*\*\*50.00

DOCUMENT # L01000002163  
1. Entity Name  
UREMBO SUPPLIES LLC



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 3393 PEACHTREE ROAD NE Suite, Apt. #, etc. 2044 City & State ATLANTA, GEORGIA Zip 30326 Country FULTON		3. Mailing Address 3393 PEACHTREE ROAD, NE Suite, Apt. #, etc. 2044 City & State ATLANTA GEORGIA Zip 30326 Country FULTON	
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DO NOT WRITE IN THIS SPACE

4. FEI Number 651093228		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required

<b>DO NOT WRITE IN THIS SPACE</b>	7. Name and Address of Current Registered Agent	
	Name FRED ARUNGAH	
	Street Address (P.O. Box Number is Not Acceptable) 4501 NW 15TH STREET	
	City LAUDERHILL	Zip Code FL 33313

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] DATE: MAY 14, 2003

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

**FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FRED ARUNGAH 4501 NW 15TH STREET LAUDERHILL, FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM URGENT CARGO HANDLING LIMITED 24210 DUNDEE HOUSE NAIROBI - KENYA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E083B (12/02)

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] DATE: MAY 14, 2003 DAYTIME PHONE #: 678 508 9084

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

Attachment

10108220

~~A LO/000002/02~~

**Urembo Supplies LLC**

3393 Peachtree Road NE Suite #2044

Atlanta GA 30326

Tel: 404 846 0006

E-mail: afrikanagallery@aol.com

**May 14, 2003**

Florida Department of State  
Division of Corporations  
P.O. Box 6478  
Tallahassee, FL 32314

Dear Sir/Madam:

**RE: Annual Report  
Urembo Supplies LLC**

We regret the late filing of this report, but wish to point out that the appropriate forms were not mailed us to enable timely filing.

Yours truly,

Fred Arungah  
Manager  
Urembo Supplies LLC  
DBA: AFRIKANA

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