

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 02, 2002 8:00 am
Secretary of State

07-02-2002 90818 035 ****50.00

DOCUMENT # L01000004772

1. Entity Name

CORAL GABLES INDUSTRIAL RENTALS, LLC

Principal Place of Business

2423 ALHAMBRA CIR.
 CORAL GABLES FL 33134

Mailing Address

2423 ALHAMBRA CIR.
 CORAL GABLES FL 33134

2. Principal Place of Business

4811 NW 79 AV.

Suite, Apt. #, etc.
 # 5

City & State
 MIAMI, FL

Zip Country
 33166 MIAMI-DADE

3. Mailing Address

4811 NW 79 AV.

Suite, Apt. #, etc.
 SUITE # 5

City & State
 MIAMI, FL

Zip Country
 33166 MIAMI-DADE

4. FEI Number

65-1086379

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MOODY, BRENT ESQ.
 515 EAST LAS OLAS BLVD.
 FT. LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

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

Cesar E. Serrano

CE SAR E. SERRANO
 MANAGER

(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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
MGR	HOOVER, JOHN W JR.	2423 ALHAMBRA CIR.	CORAL GABLES FL 33134	<input type="checkbox"/>
MGR	SERRANO, CESAR E	2423 ALHAMBRA CIR.	CORAL GABLES FL 33134	<input type="checkbox"/>
MGR	HOOVER, ELIZABETH J	2423 ALHAMBRA CIR.	CORAL GABLES FL 33134	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
MGR.	SERRANO, CESAR E	4811 NW 79 AVE. SUITE #5	MIAMI, FL. 33166	<input checked="" type="checkbox"/>	<input type="checkbox"/>
MGR	HOOVER, ELIZABETH J.	2700 ALHAMBRA CIR.	CORAL GABLES, FL. 33134	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> 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:

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

Cesar E. Serrano
 CESAR E SERRANO
 MANAGER

Date

Daytime Phone #

4/18/02 (305) 592-6559



DO NOT WRITE IN THIS SPACE

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