


2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2003 8:00 am
Secretary of State

03-11-2003 90028 044 ****50.00

DOCUMENT # L02000002719

1. Entity Name
776 PROPERTIES LLC



Principal Place of Business
**7700 N. KENDALL DRIVE
SUITE 809
MIAMI FL 33156**

Mailing Address
**7700 N. KENDALL DRIVE
SUITE 809
MIAMI FL 33156**

2. Principal Place of Business
10200 OLD CUTLER ROAD

3. Mailing Address
10200 OLD CUTLER ROAD

Suite, Apt. #, etc.

City & State
MIAMI, FLORIDA

City & State
MIAMI, FLORIDA

Zip Country
33156 USA

Zip Country
33156 USA



CHECK HERE IF MAKING CHANGES

4. FEI Number
EIN: 02-0542666

Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
**SALAZAR GERMAN A
7700 N. KENDALL DRIVE
SUITE 809
MIAMI FL 33156**

7. Name and Address of New Registered Agent

Name
MIGUEL G. FARRA

Street Address (P.O. Box Number is Not Acceptable)
C/O MORRISON BROWN ARGIZ & CO.

1001 B RICKELL BAY DR., 9TH FLOOR

City
MIAMI

Zip Code
FL 33131

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  **MIGUEL G. FARRA** DATE **3/5/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
MGRM, S, T	BETANCOURT, HECTOR	7700 N. KENDALL DRIVE, SUITE 809	MIAMI FL 33156	<input type="checkbox"/>
MGRM, P	QUADROS, MARIO	7700 N. KENDALL DRIVE, SUITE 809	MIAMI FL 33156	<input type="checkbox"/>
MGRM, VP	SALAZAR, EDUARDO	7700 N. KENDALL DRIVE, SUITE 809	MIAMI FL 33156	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Secretary and Treasurer	BETANCOURT, HECTOR	(SAME ADDRESS)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
PRESIDENT	QUADROS, MARIO	(SAME ADDRESS)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
VICE-PRESIDENT	SALAZAR, EDUARDO	(SAME ADDRESS)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
MGRM	DILLON, JOHN	7700 N. KENDALL DR., SUITE 809	MIAMI, FLORIDA 33156	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:  **HECTOR J. BETANCOURT** DATE **3/5/03** (205) 373-4720

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

CR2E083 (10/02)