

2002 **LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90735 002 ****50.00

DOCUMENT # L00000014537

1. Entity Name
Ayp Travel Agency LLC

DO NOT WRITE IN THIS SPACE

80061796

2. Principal Place of Business
17050 N. Bay Rd.

3. Mailing Address
17050 N. Bay Rd.

Suite, Apt. #, etc.
#303

Suite/Apt. #, etc.
#303

DO NOT WRITE IN THIS SPACE

City & State
Sunny Isles - FL.

City & State
Sunny Isles - FL

4. FEI Number
65-1023096

Applied For
Not Applicable

Zip
33160

Country
USA

Zip
33160

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
NORMAN VERGARA

Street Address (P.O. Box Number is Not Acceptable)
17050 N. Bay Rd.

City
Sunny Isles FL Zip Code
33160

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

DATE
3-26-02

FEE IS \$30.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
VERGARA Norman
17050 N. Bay Rd.
Sunny Isles - FL 33160

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
VERGARA Patricia
17050 N. Bay Rd.
Sunny Isles - FL 33160

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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CITY - ST - ZIP

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IN THIS SPACE**

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

DATE
3-26-02

DAYTIME PHONE #
305-947-4423

CR2E083B (12/01)