## LIMITED LIABILITY COMPANY 2002-UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 12, 2002 8:00 am Secretary of State

Daytime Phone #

05-12-2002 90576 047 \*\*\*\*50.00 DOCUMENT # L00000006347 1. Entity Name EXCEL COM, LLC DO NOT WRITE IN THIS SPACE 957204 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. 266 NE 70th St. Suite. Apt. #, etc. 266 NE 70th St. \_DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Miami Miami 65-1039098 Not Applicable Zip 3,3,1,3,8... Country \$5.00 Additional ≟UŚA 33138 5. Certificate of Status Desired: -USA 7. Name and Address of Current Registered Agent Name Jerome Hollo DO NOT WRITE STed Oddess (P.B. Bes Cayne Not Acceptable) IN THIS SPACE Ŝŭite 1100 Miami 33731 8. The above named entity sub or the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1.17-02 §#GNATURE Signature, typed or printer id title if applicable FEE IS \$50.00 Make Check Payable to Department of State **DUE BY MAY 1** MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME KALIMI, SAMI NAME STREET ADDRESS 266 NE 70th St. Miami, FL 33138 STREET\_ADDRESS CR2E083B CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DO NOT WRITE CITY - ST - ZIP DITE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ÜTLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 legal view of thustee empowered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE:

UTHORIZED REPRESENTATIVE