7/23

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 13, 2002 8:00 am
Secretary of State
07-23-2002 90345 033 ****50.00

DOCUMENT # L00000003161

1. Entity Name
G.A.M., L.L.C.

Principal Place of Business	Mailing Address
~~8320 W. SUNRISE BLVD.~~ ~~SUITE 115~~ ~~PLANTATION FL 33322~~	~~8320 W. SUNRISE BLVD.~~ ~~SUITE 115~~ ~~PLANTATION FL 33322~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1944 ASPEN LANE	1944 ASPEN LANE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: WESTON FLA	City & State: WESTON FLA
Zip: 33327 Country: BROWARD	Zip: 33327 Country: BROWARD

4. FEI Number 65-0992211 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~CUEVAS, ANDREW ESQ.~~ ~~536 BILTMORE WAY~~ ~~CORAL GABLES FL 33134~~	Name: MAURICIO-LATTANZIO Street Address (P.O. Box Number is Not Acceptable): 1944 ASPEN LANE City: WESTON FL Zip Code: 33327

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 _____ DATE
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 Department of State
Due By September 25, 2002

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ~~LATTANZIO, MAURICIO~~ ~~8320 W. SUNRISE BLVD. #115~~ ~~PLANTATION FL 33322~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM LATTANZIO MAURICIO 1944 ASPEN LANE WESTON FL 33327	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ~~LATTANZIO, ANTONIO~~ ~~8320 W. SUNRISE BLVD. #115~~ ~~PLANTATION FL 33322~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM LATTANZIO ANTONIO 1944 ASPEN LANE WESTON FL 33327	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ~~LATTANZIO, GEORGIO~~ ~~8320 W. SUNRISE BLVD. #115~~ ~~PLANTATION FL 33322~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM LATTANZIO GIORGIO 1944 ASPEN LANE WESTON FLA 33327	☐ Change ☐ Addition
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CR2E063 (4/02)

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #