

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)****FILED**

03 MAY 22 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**30068215****DOCUMENT # L00000013382**1. Entity Name
CAN MEX INVESTMENTS, LLCPrincipal Place of Business
601 BRICKELL KEY DRIVE STE. 802
MIAMI, FL 33131Mailing Address
601 BRICKELL KEY DRIVE STE. 802
MIAMI, FL 33131

2. Principal Place of Business

330 LINCOLN ROAD

3. Mailing Address

330 LINCOLN ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI BEACH, FL

City & State

MIAMI BEACH, FL

4. FEI Number

85-1051457

Applied For

Not Applicable

Zip

33139

Country

DADE

Zip

33139

Country

DADE

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VAZQUEZ, GERARDO A ESQ.
601 BRICKELL KEY DRIVE STE. 802
MIAMI, FL 33131

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and date of filing

Signature, typed or printed name of registered agent and date of filing

DATE

9. MANAGING MEMBERS / MANAGERSTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
VAZQUEZ, GERARDO A
601 BRICKELL KEY DRIVE STE. 802
MIAMI, FL 33131☐ Delete**10. ADDITIONS / CHANGES**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
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☐ Change ☐ AdditionTITLE
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CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied in this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information disclosed 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: *Carlos Garcia*

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

CARLOS GARCIA**MANAGER**

4/30/03 306-672-4353

Date

Deputy Process

CITE: 608.210(1)