

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

0013113

**DOCUMENT # L01000016873**

1. Entity Name

**PICTURVALE TRADING L.L.C.**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 SEP 25 AM 10:45

2/29/26

Principal Place of Business

**AVE DE RICARDO SORIANO 12-1  
29600 MARBELLA  
MALAGA, SPAIN**

Mailing Address

**ONE S.E. THIRD AVE.  
SUITE 2250  
MIAMI FL 33131**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES4. FEI Number **NOT APPLICABLE**

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

**AMKGS REGISTERED AGENTS, INC.  
2250 SUNTRUST INTERNATIONAL CENTER  
ONE S.E. THIRD AVE.  
MIAMI FL 33131**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2003**  
**900023340859**  
**03/25/03--01072--001 \*\*50.00**

## 9. MANAGING MEMBERS/MANAGERS

## 10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>MGRM</b>		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>DIERKS, VEIT G</b>						
	<b>AVE DE RICARDO SORIANO 12-1</b>						
	<b>MARBELLA, MALAGA, SPAIN 29600</b>						
	<b>MGRM</b>		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>PEREZ, ANTONIO N</b>						
	<b>AVE DE RICARDO SORIANO 12-1</b>						
	<b>MARBELLA, MALAGA, SPAIN 29600</b>						
	<b>MGRM</b>		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>RUEDA, JOSEFA S</b>						
	<b>AVE DE RICARDO SORIANO 12-1</b>						
	<b>MARBELLA, MALAGA, SPAIN 29600</b>						
			<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this report 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

Daytime Phone #

9/9/03

305-3725928

CR2E083 (10/02)