

2001 UNIFORM BUSINESS REPORT (UBR)

0000114 AF

DOCUMENT # L00000001007

1. Entity Name
E-PROJECTS LLC

Principal Place of Business
701 BRICKELL AVENUE, SUITE 850
MIAMI FL 33131

Mailing Address
701 BRICKELL AVENUE, SUITE 850
MIAMI FL 33131

FILED

2001 APR 30 AM 9:35

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

☒ 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

GONZALEZ, CARLOS
701 BRICKELL AVENUE, SUITE 850
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.

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 Department of State

300004220073--0
-05/16/01--01071--025
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME RODRIGUEZ-FRAILE, GONZALO
STREET ADDRESS 701 BRICKELL AVENUE, SUITE 850
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Change ☒ Addition
NAME PST D
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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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 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

4/24/01 (305) 381-8340

Date

Daytime Phone #

CR2E083 (11/00)