

2002 UNIFORM BUSINESS REPORT (UBR)

7/23

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

~~8320 W. SUNRISE BLVD.~~
~~SUITE 115~~
~~PLANTATION FL 33322~~

Mailing Address

~~8320 W. SUNRISE BLVD.~~
~~SUITE 115~~
~~PLANTATION FL 33322~~

2. Principal Place of Business

1044 ASPEN LANE

Suite, Apt. #, etc.

3. Mailing Address

1044 ASPEN LANE

Suite, Apt. #, etc.

City & State

WESTON FLA

City & State

WESTON FLA

Zip

33327

Country

FLORIDA

Zip

33327

Country

FLORIDA

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 EGO
~~530 BILTMORE WAY~~
~~CORAL GABLES FL 33134~~

Name

MAURICIO LATTANZIO

Street Address (P.O. Box Number is Not Acceptable)

1044 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

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
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, ANTONIO 8320 W. SUNRISE BLVD. #115 PLANTATION FL 33322	☐ Delete
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		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LATTANZIO, MAURICIO 1044 ASPEN LANE WESTON FL 33327	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LATTANZIO, ANTONIO 1044 ASPEN LANE WESTON FL 33327	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LATTANZIO, GEORGIO 1044 ASPEN LANE WESTON FLA 33327	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 #

CR2E083 (4/02)