LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
05-06-2002 90124 006 ****50.00

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Name
MINT ENTERTAINMENT, LLC

954044

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2. Principal Place of Business
221 COLLINS AVE
MIAMI BEACH, FL 33139
Country USA

3. Mailing Address
J. SCHECHTMAN CPA
~~9050 PINES BLVD~~
Suite, Apt. #, etc.
SUITE 205
City & State
PEMBROKE PINES, FL
Zip 33024
Country USA

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4. FEI Number
65-1007529
☐ Applied For
☐ Not Applicable

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

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7. Name and Address of Current Registered Agent
Name
ROBERTO CAAN
Street Address (P.O. Box Number is Not Acceptable)
830 W. DILIDO DRIVE
City MIAMI BEACH, FL Zip Code 33139

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 _____ DATE
Signature, type or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

MANAGING MEMBERS / MANAGERS

(ESC) ROBERTO CAAN
830 W. DILIDO DRIVE
MIAMI BEACH, FLORIDA 33139

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CR2E083B (12/01)

8. 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: X ROBERTO CAAN PRESIDENT 4/22/02 (305)674-9154
SIGNATURE & TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #