

2001 UNIFORM BUSINESS REPORT (UBR)

192
12/1/01

DOCUMENT # L00000006027

1. Entity Name
POPCAB, LLC

FILED

01 JAN 19 PM 4:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
4417 NW 93 DORAL CT
MIAMI FL 33178

Mailing Address
4417 NW 93 DORAL CT
MIAMI FL 33178

2. Principal Place of Business
8308 NW 74 Ave

3. Mailing Address
8308 NW 74 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
65-1017953

Applied For
Not Applicable

Zip
33166 Country
USA

Zip
33166 Country
USA

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

6. Name and Address of Current Registered Agent

PENINSULA REGISTERED AGENTS, INC.
200 S BISCAYNE BLVD
43RD FL
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.

800003576178--4

-01/26/01--01040--007

*****50.00 *****50.00

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGING MEMBER
PALMER, MATTHEW A
12790 SW 64th Court
MIAMI FL 33156

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGING MEMBER
JONES, JONIA M
3360 DOCKSIDE DRIVE
COOPER CITY, FL 33026

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGING MEMBER
JAVIER CASTANEDA
9520 SW 117th COURT
MIAMI, FL 33186

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGING MEMBER
STARKER, JOHN J.
1042 NW 195 AVE
DEM BROKE PINES FL 33029

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGING MEMBER
MAZZOLA, CHRISTIAN L
4417 NW 93 DORAL CT
MIAMI, FL 33178

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGING MEMBER
de la Torre, Ralph
11 Shipway Place
CHARLESTOWN, MA 02129

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MANAGING MEMBER
PALMER, MATTHEW A
12790 SW 64 COURT
MIAMI FL 33156

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de la Torre, Ralph
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CHARLESTOWN, MA 02129

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: E. S. MAZZOLA MAZZOLA 1/12/01 305.863.1603

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

Date

Daytime Phone #

CR2E083 (11/00)

ADDITIONS / CHANGES Continued

292

Managing Member

Box, J. William

300 LEUCANDENDRA DR

CORAL GABLES, FL 33156

Member

FRANCESE, JOSE L.

1161 Plover Ave

MIAMI SPRINGS, FL 33166
