

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

02-27-2002 90086 042 ****50.00

DOCUMENT # L00000006458

1. Entity Name

2M INTERNET VENTURES, L.L.C.

Principal Place of Business

**9051 NW 43RD TERRACE
 MIAMI FL 33178**

Mailing Address

**9051 NW 43RD TERRACE
 MIAMI FL 33178**

27200

2. Principal Place of Business

11024 NW 72 Terr

3. Mailing Address

11024 NW 72 Terr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL.

City & State

Miami, FL.

Zip

33178

Country

U.S.A.

Zip

33178

Country

U.S.A.

DO NOT WRITE IN THIS SPACE

02-0575933

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MANRIQUE, BERNARDO
 9051 NW 43RD TERRACE
 MIAMI FL 33178**

New Address
 →

7. Name and Address of New Registered Agent

Name

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

11024 NW 72 Terr.

City **Miami,**

FL

Zip Code

33178

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
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE

MGR

MANRIQUE, BERNARDO

9051 NW 43RD TERRACE

MIAMI FL 33178

☐ Delete

**11024 NW 72 Terr
 Miami, FL 33178**

10.

ADDITIONS/CHANGES

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

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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: ✓

SIG Bernar...

✓

Feb. 14th 2002

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

Date

Daytime Phone #

CR2E083 (9/01)