2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000006458

1. Entity Name

2M INTERNET VENTURES, L.L.C.



FILED Apr 14, 2003 8:00 am Secretary of State 04-14-2003 90750 035 ****50.00

Principal Plac	e of Business	Mailing Address								
11024 NW 72 T MIAMI FL 33178		11024 NW 72 TERR MIAMI FL 33178								
		_				111 111 111 111 111 111 111 111 111 11				
2. Principal P	Place of Business	3. Mailing Address	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI N	020070800			pplied For lot Applicable	
Zip	Country	Zip	Country		5. Certifi	cate of Status Desired		5.00 Ad ee Require		
	6. Name and Address of Current	Registered Agent			7. Name	and Address of New F	Registered Ag	jent		
LIAN	DIOLIC PEDMADDO			Name						
1102	rique, Bernardô 14 NW 72 Terr 11 Fl 33178		-	Street Address (P.O. Box Number is Not Acceptable)						
				City			FL	Zip Coc	de	
8 Th				d office or re-1	atorod case* =	r both, in the State of El		miliar with	and accept	
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	s registere	a office or regi	sterea agent, c	r both, in the State of Fi	orida. I am ia	militar willi,	, and accept	
SIGNATURE .	Signature, typed or printed name of registered ageni	t and title if applicable. (NO	TE: Registered	Agent signature req	uired when reinstatin	g)	DATE			
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				y 1, 2003	mone or old					
	MANAGINIO MEMB					ADDITIONS	/CHANCES			
9.	MANAGING MEMB	ERS/MANAGERS Delete	10. TITLE			ADDITIONS		☐ Change	☐ Addition	
TITLE NAME	MGR MANRIQUE, BERNARDO	⊏1 ∩elefe	NAME	I				onungs		
STREET ADDRESS	11024 NW 72 TERR			T ADDRESS						
CITY-ST-ZIP	MIAMI FL 33178		CITY-	ST-ZIP						
TITLE	WIN WILL COLLEGE	☐ Delete	TITLE		,			☐ Change	Addition	
NAME			NAME		·					
STREET ADDRESS				ET ADDRESS						
CITY-ST-ZIP			CITY-	ST-ZIP						
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CITY-ST-ZIP							· · · · · · · · · · · · · · · · · · ·	Change	- Addition	
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CITY-ST-ZIP			CITY-	ST-ZIP						
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NAME			NAME							
STREET ADDRESS				ET ADDRESS						
CITY-ST-ZIP				ST-ZIP						
11. I hereby	certify that the information supplied wit	th this filing does not qualify fo	or the exer	nption stated in	Section 119.0	7(3)(i), Florida Statutes.	I further certi	fy that the	information	
indicated	I on this report is true and accurate and ability company or the receiver or truste	d that my signature shall have	the same	legal effect as	if made under	oath; that I am a mana	ging member	or manag	er of the	