

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000006535

FILED
Sep 24, 2002
Secretary of State

Entity Name: THE TELEMARQUE GROUP LTD., LLC

Current Principal Place of Business:

10053 S.W. 16TH STREET
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 694293
MIAMI, FL 33269 US

New Mailing Address:

FEI Number: 65-1015170

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STARKE, LEONARDO D ESQ
3340 MCDONALD ST
SUITE A
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

MACKEY, JAMES L
10053 S.W. 16TH STREET
PEMBROKE PINES, FL 33025 US

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: JAMES L. MACKEY JR.

09/24/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MACKEY, JAMES L PRES.
Address: 10053 S.W. 16TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025 US

Title: MGRM () Delete
Name: MACKEY, HASSAN W V.PRES.
Address: 1220 N.E. 138TH STREET
City-St-Zip: NORTH MIAMI, FL 33161 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: MACKEY, HASSAN W V.PRES.
Address: 10053 S.W. 16TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JAMES L. MACKEY

MGRM

09/24/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date