

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 08, 2002 8:00 am
Secretary of State

07-08-2002 90238 010 ****55.00

DOCUMENT # L00000007222

1. Entity Name

AFINCOR INTERNATIONAL, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1290 WESTON RD

Suite, Apt. #, etc.

218

3. Mailing Address

1290 WESTON ROAD

Suite, Apt. #, etc.

218

DO NOT WRITE IN THIS SPACE

City & State

WESTON, FLORIDA

Zip

33326

Country

U.S.A

City & State

WESTON, FLORIDA

Zip

33326

Country

U.S.A

4. FEI Number

05-1019063

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

ERNESTO MATA

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

3041 BIRKDALE

City

WESTON

FL

Zip Code

33332

**DO NOT WRITE
IN THIS SPACE**

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.

07-03-02

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
MATA, ANGEL E.
1290 WESTON RD # 218
WESTON FL, 33326

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
60004 NESTOR CASTRO E.
1290 WESTON RD # 218
WESTON FL, 33326

TITLE
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CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

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:

07-03-02

(954) 389-2665

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

Date

Daytime Phone #

CR2E083B (12/01)