2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000007906

1. Entity Name

Ceres Marketing, LLC

FILED
2001 MAY -2 PM 4:10
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Principal Place of Business | Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
7801 NW 37th Street		7801 NW 37th Street	
Suite, Apt. #, etc. Aerocav #1766		Suite, Apt. #, etc. Aerocav #1766	
City & State Miami, Florida		City & State Miami, Florida	
Zip 33166	Country U.S.A.	Zip 33166	Country U.S.A.

4. FEI Number 65-1022548 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

Andrew Cuevas
Cuevas & Rubin
536 Biltmore Way
Coral Gables, FL 33134

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.

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

700004336637--9
-05/31/01--01087--016
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

TITLE	Member	☐ Delete
NAME	George Bodoutchian	
STREET ADDRESS	7801 NW 37 St Aerocav #1766	
CITY-ST-ZIP	Miami, FL 33166	
TITLE	Member	☐ Delete
NAME	Sonia Margarita Lastra Alvarez	
STREET ADDRESS	7801 NW 37 St Aerocav #1766	
CITY-ST-ZIP	Miami, FL 33166	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E063 (11/00)

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: George Bodoutchian 04.30.2001 (305)982-4042
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #