2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000008436

1. Entity Name

MICHAEL CURRAN LLC

Principal Place of Business
APT. 44. ENCOSTA DO LAGO QUINTA DA LAGO 8135 ALMANCIL. PORTGAL

Mailing Address

215 NORTH EOLA DRIVE

FILED Sep 25, 2002 8:00 am Secretary of State 09-25-2002 90116 018 ****50.00

ALMANCIL PORTGAL		ORLANDO FL	DRLANDO FL 32801								
2. Principal	I Place of Busi	nore	La maria						1 11 11 11 11 1	1 1 1 1 1	
3.			3. Mailing Add	. Mailing Address			<u> </u>				
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State			City & State			4. FEI	4. FEI Number NOT APPLICABLE Applied For				
Zip		Country	Zip	Co	ountry	5. Cer	tificate of Status Desired	\$	5.00 A	Not Applicated	
	6. Name	and Address of Currer	it Registered Agen		-,			F	ee Requi	ired	
≤ RYAN, MICHAEL					Name	7. Name and Address of New Registered Agent					
215 N. EOLA DRIVE ORLANDO FL 32801				Street Address		Address (P.O. Box I	ss (P.O. Box Number is Not Acceptable)				
14.7						-					
					City			FL	Zip Co		
the obliga	e named entity ations of regist	submits this statement f ered agent.	or the purpose of ch	nanging its regist	ered office	or registered agent,	or both, in the State of F	lorida. I am far	niliar with	n, and accept	
SIGNATURE	Signature, typed	or printed name of registered agen	t and tills if and a skip			,	·				
		painted hairie or registered agen	and the mappicable.	(1) 10 10 10 10 10 10 10 10 10 10 10 10 10	Section Section (Section 1)	ature required when reinstat	ng)	DATE	;		
			Make C	FILE NOW!!! heck Payable	to Depar	tment of State			• •		
9.				Due By Sept	ember 25	, 2002	, '				
TITLE	MEM	MANAGING MEMBI					ADDITIONS	/CHANGES			
NAME	CURRAN,	MICHAEL [®]		1	rle Me *				Change	Addition	
STREET ADDRESS APT. 44, ENCOSTA DO LAGO QUINTA			QUINTA DALAGOS	3135 ST	REET ADDRESS	" TORRY	" BRIGHTON	Ren)			
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CITY-ST-ZIP		•		Jinc	- NUDITEGG	•					

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.

9-9-02

MICHAEL CURRAN