

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000008664

1. Entity Name

PRG, LC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 SEP 27 AM 12: 06

Principal Place of Business 701 BRICKELL KEY BOULEVARD, SUITE 1908 MIAMI FL 33131	Mailing Address 701 BRICKELL KEY BOULEVARD, SUITE 1908 MIAMI FL 33131
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2. Principal Place of Business 9935 NW 43RD TERR Suite, Apt. #, etc.	3. Mailing Address 43 9935 NW 43RD TERR Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State MIAMI, FLORIDA	City & State MIAMI, FLORIDA	4. FEI Number 651029309	Applied For Not Applicable
Zip 33178	Country USA	Zip 33178	Country USA
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134	7. Name and Address of New Registered Agent Name PALOMA RUIZ Street Address (P.O. Box Number is Not Acceptable) 9935 NW 43RD TERR City MIAMI FL Zip Code 33178
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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 *x Paloma Ruiz* DATE 9-24-01

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By September 26, 2001

400004619394-8
-10/02/01--01008--01
*****50.00 *****50.00

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUIZ, PALOMA 701 BRICKELL KEY BOULEVARD, SUITE 1908 MIAMI FL 33131	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RUIZ, PALOMA 9935 NW 43RD TERR MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR JOSE I RUIZ 9935 NW 43RD TERR MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *x Paloma Ruiz* DATE 9-24-01 (305) 436-5375

CR2008 (5/01)