

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000008954

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: AUTENTICO, L.L.C.

**Current Principal Place of Business:**

4700 NORTH STATE RD 7, STE 208  
FORT LAUDERDALE, FL 333195804

**New Principal Place of Business:**

**Current Mailing Address:**

4700 NORTH STATE RD 7, STE 208  
FORT LAUDERDALE, FL 333195804

**New Mailing Address:**

FEI Number: 65-1027434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STUART M. ROTMAN, C.P.A.  
4700 NORTH STATE RD 7, STE 208  
FORT LAUDERDALE, FL 333195804 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: LISOCKI, ANDRES  
Address: 4900 N. OCEAN BLVD., #921  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES:**

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

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: ANDRES LISOCKI

MGRM

04/30/2003

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