
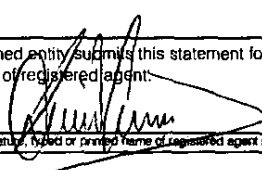
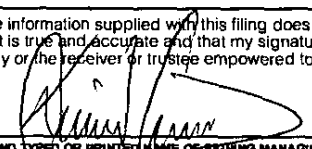


2002-2003 UNIFORM BUSINESS REPORT (UBR)

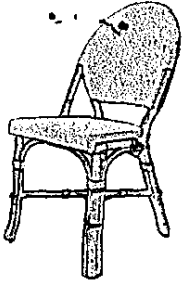
LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

10/2

DOCUMENT # L00000008989			
1. Entity Name LOUISIANA, LLC		FILED 03 JUL 29 PM 12:51 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 3000-12 NW 25TH AVE Suite, Apt. #, etc.		3. Mailing Address SAME AS PLACE OF BUSINESS Suite, Apt. #, etc.	
City & State POMPAÑO BEACH, FL		City & State	
Zip 33069	Country	Zip	Country
4. FEI Number 36-4383124		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			
7. Name and Address of Current Registered Agent			
Name DANIEL CAIRO			
Street Address (P.O. Box Number is Not Acceptable) 3000-12 NW 25TH AVE			
City POMPAÑO BEACH FL Zip Code 33069			
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE 7.22.03	
FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1			
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOLEDE, JEAN LL 11 BLVD. BELLAMY ROYAN, FRANCE 17200	TITLE NAME STREET ADDRESS CITY-ST-ZIP	02/18/02 90166 046 \$50.00 502053902923
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CAIRO, DANIEL 2155 NW 45TH AVE COCONUT CREEK, FL 33066	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		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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: 		DATE 7.22.03	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	

CR2E083B (12/02)

242



Louisiana LLC.

3000-12 NW 25th Av. - Pompano Beach, FL 33069 - T: (954) 917 8834 / F: (954) 917 8835

Attachment

L00000008989
#

07.22.03

Fla. Dept. of State
LLC Division
PO Box 6478
Tallahassee, FL 32314-6478

RE: Louisiana LLC (EIN #36-433124)

Dear Sir or Madam:

A potential client of our company informed me that Louisiana LLC was not active. I researched to see if the dues were paid and I noticed the check #10295 payable to Department of State was cashed in February of 2002 for \$50.00. since your department deactivated the company in 2002, we didn't receive the 2003 Uniform Business Report. I prepared the 2002 Uniform Business Report for 2002 and 2003 along with \$50.00 for 2003. Your department cashed the \$50.00 for 2002. I can furnish the cleared check if requested. We have been having problems with our mail in the past. It has been corrected. Please accept the reports and check for \$50.00 to activate Louisiana LLC.

Sincerely,

Daniel Cairo

Partner

Enclosure