2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L-10152

1. Entity Name
Techbrok, L.L.C.

9/28/01

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JAN 28 PM 2:03

Principal Place of Business	Mailing Address
1172 S. Dixie Hwy. Suite 685 Coral Gables, FL 33146	1172 S. Dixie Hwy. Suite 685 Coral Gables, FL 33146

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-1034039 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

Andrew Cuevas, Esq.
CUEVAS & RUBIN, P.A.
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 Andrew Cuevas
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!! FEE IS $550.00
Make Check Payable to Department of State

100004853611--3
-02/01/02--01060--008
****150.00 ****150.00

9. MANAGING MEMBERS / MEMBERS		10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Jesus Bejarano 1172 S. Dixie Hwy., Suite 685 Coral Gables, FL 33146 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	100004853611--3 -02/01/02--01060--009 *****50.00 *****50.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Pedro Villani 1172 S. Dixie Hwy., Suite 685 Coral Gables, FL 33146 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Rein 100.00 01 UBR 50.00 02 UBR 50.00 200.00 nc ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Carlos Redondo 1172 S. Dixie Hwy., Suite 685 Coral Gables, FL 33146 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Hector Beck 1172 S. Dixie Hwy., Suite 685 Coral Gables, FL 33146 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**REINSTATEMENT** ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2001-2002 ☐ Change ☐ Addition

CR2E083 (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: [signature] 1/24/02 (305) 495-5611
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #