FILED
Mar 04, 2003 8:00 am
Secretary of State
03-04-2003 90156 029 ****55.00

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000010453

1. Entity Name
OCEAN TERRACE LLC

Principal Place of Business	Mailing Address
7500 COLLINS AVE MIAMI BEACH, FL 33141	7500 COLLINS AVE MIAMI BEACH, FL 33141

2. Principal Place of Business	3. Mailing Address
4300 MERIDIAN AV.	4300 MERIDIAN AV.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI BEACH	City & State: MIAMI BEACH
Zip: 33140 Country: U.S.	Zip: 33140 Country: U.S.

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-1066999 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
UMANSKY, PABLO J 7500 COLLINS AVE MIAMI BEACH, FL 33141	Name: PABLO J. UMANSKY Street Address (P.O. Box Number is Not Acceptable): 4300 MERIDIAN AV. City: MIAMI BEACH FL. Zip Code: 33140

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: 4602 - Pablo Umansky 2/25/03
Signature, typed or printed name of registered agent and date signed (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW! FEE IS $50.00 Make Check Payable to Florida Department of State Due BY MAY 1st 2003

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR UMANSKY, PABLO J 7500 COLLINS AVE MIAMI BEACH, FL 33141 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MARROCCHI, DANIEL 7500 COLLINS AVE MIAMI BEACH, FL 33141 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR SILBERSTEIN, ESTELA 7500 COLLINS AVE MIAMI BEACH, FL 33141 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BENOLIEL, JACOBO 7500 COLLINS AVE MIAMI BEACH, FL 33141 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BENOLIEL, ISSAC 7500 COLLINS AVE MIAMI BEACH, FL 33141 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR LARRAURI, OSCAR 7500 COLLINS AVE MIAMI BEACH, FL 33141 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E083 (10/02)

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: 02/25/03 305-216-8315
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

PABLO UMANSKY. 4602.