

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 22, 2002 8:00 am**  
**Secretary of State**

04-22-2002 90233 024 \*\*\*\*50.00

**DOCUMENT # L00000010955**

1. Entity Name

CLARO L.L.C.

Principal Place of Business

94 NW 97TH STREET  
 MIAMI SHORES FL 33150

Mailing Address

94 NW 97TH STREET  
 MIAMI SHORES FL 33150

2. Principal Place of Business

94 NW 97TH Street

3. Mailing Address

94 NW 97TH Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami Shores, FL

City & State

Miami Shores, FL

Zip

33150

Country

USA

Zip

33150

Country

USA

6. Name and Address of Current Registered Agent

BIERI, BRIDGET C  
 94 NW 97TH STREET  
 MIAMI SHORES FL 33150

7. Name and Address of New Registered Agent

Name

N/A

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE P  
 NAME BIERI, BRIDGET  
 STREET ADDRESS 94 NW 97TH ST  
 CITY-ST-ZIP MIAMI SHORES FL 33150 ☐ Delete

TITLE V  
 NAME WEISS, ANDRE R  
 STREET ADDRESS 94 NW 97TH ST  
 CITY-ST-ZIP MIAMI SHORES FL 33150 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE P  
 NAME Bridget Bieri  
 STREET ADDRESS 94 NW 97TH Street  
 CITY-ST-ZIP Miami Shores, FL 33150 ☐ Change ☒ Addition

TITLE V  
 NAME Andre Roger Weiss  
 STREET ADDRESS 94 NW 97TH Street  
 CITY-ST-ZIP Miami Shores, FL 33150 ☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

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:

Andre Roger Weiss

03-20-02 3057592737

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)