

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000013543

FILED
Apr 10, 2002 8:00 AM
Secretary of State

Entity Name: VEFA, LLC

Current Principal Place of Business:

10800 BISCAYNE BLVD., SUITE 580
MIAMI, FL 33161

New Principal Place of Business:

1790 CORAL WAY
202
MIAMI, FL 33145

Current Mailing Address:

10800 BISCAYNE BLVD., SUITE 580
MIAMI, FL 33161

New Mailing Address:

1790 CORAL WAY
202
MIAMI, FL 33145

FEI Number: 52-2291061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINARES, JUAN MANUEL
10800 BISCAYNE BLVD., SUITE 580
MIAMI, FL 33161

Name and Address of New Registered Agent:

LINARES, JUAN MANUEL
1790 CORAL WAY
MIAMI, FL 33145

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:

04/10/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: OLIVEROS, MARCELA
Address: 10800 BISCAYNE BLVD., SUITE 580
City-St-Zip: MIAMI, FL 33161

Title: MGRM () Delete
Name: VENEGAS, RUTH
Address: 10800 BISCAYNE BLVD., SUITE 580
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OLIVEROS, MARCELA
Address: 1790 CORAL WAY SUITE 202
City-St-Zip: MIAMI, FL 33145

Title: MGRM (X) Change () Addition
Name: VENEGAS, RUTH
Address: 1790 CORAL WAY SUITE 202
City-St-Zip: MIAMI, FL 33145

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: RUTH VENEGAS

MGR

04/10/2002

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