

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2003 8:00 am
Secretary of State

02-05-2003 90038 011 ****50.00

DOCUMENT # L00000013874

1. Entity Name
NG USA, L.L.C.



Principal Place of Business
**12205 SW 131 ST AVENUE
MIAMI FL 33186**

Mailing Address
**12205 S.W. 131ST AVENUE
MIAMI FL 33186**

2. Principal Place of Business
10501 SW 159 CT

3. Mailing Address
10501 SW 159 CT

City & State
Miami Florida

City & State
Miami Florida

Zip
33196

Country
USA

Zip
33196

Country
USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1085065**

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HUNG, EDWARD
12984 S.W. 132 AVE.
MIAMI FL 33186

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ☒ **01/30/03**
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 Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS		
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	HUNG, EDWARD	
STREET ADDRESS	12205 SW 131 ST AVENUE	
CITY-ST-ZIP	MIAMI FL 33-3186	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	HUNG, EDGAR	
STREET ADDRESS	12205 SW 131ST AVENUE	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	HUNG, ERASMO	
STREET ADDRESS	12205 SW 131ST AVENUE	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	HUNG, ESMER	
STREET ADDRESS	12205 SW 131 ST AVUENE	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: **EDGAR HUNG, PARTNER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

01/30/03
Date Daytime Phone #

CR2E083 (10/02)