2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State
03-05-2002 90055 032 ****50.00

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DO NOT WRITE IN THIS SPACE

1. Entity Name
GERSO INVESTMENTS, L.L.C.

Principal Place of Business	Mailing Address
10530 NW 26 ST. SUITE F 106 MIAMI FL 33172	10530 NW 26 ST. SUITE F 106 MIAMI FL 33172

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 65-1057894 ☐ 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
SOTELO, HUGO 1600 SW 2ND AVE MIAMI FL 33129	Name: Hugo A. Sotelo Street Address (P.O. Box Number is Not Acceptable): 10530 NW 26 Street, Suite F-106 City: Miami FL Zip Code: 33172

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: Hugo Sotelo 02/18/02
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			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M SOTELO, HUGO 1600 SW 2ND AVE MIAMI FL 33129	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M Sotelo, Hugo A. 7240 NW 113 Court Miami, FL 33178	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M SOTELO, NUBIA 1600 SW 2ND AVE MIAMI FL 33129	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M Sotelo, Nubia 7240 NW 113 Court Miami, FL 33178	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M ALHENA INTERNATIONAL FITTING CORP 1600 SW 2ND AVE MIAMI FL 33129	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M Alhena International Fitting Corp. 10530 NW 26 Street, Suite F-106 Miami, FL 33178	☒ 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
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CR2E083 (9/01)

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: Hugo Sotelo SIGNATURE REQUIRED 02/18/02 (305) 463-6774 (305) 468-9180
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #