

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 30, 2003 8:00 am**  
**Secretary of State**

07-30-2003 90045 002 \*\*\*150.00

DOCUMENT # L00000013957

1. Entity Name

AN & RE INVESTMENTS, LLC



90148049

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 1378 VICTORIA ISLE DR Suite, Apt. #, etc.		3. Mailing Address 1378 VICTORIA ISLE Suite, Apt. #, etc.	
City & State WESTON, FL		City & State WESTON, FL	
Zip 33327	Country USA	Zip 33327	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1101535	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name PASTRANA, ANDRES	
Street Address (P.O. Box Number is Not Acceptable) 1378 VICTORIA ISLE DR	
City WESTON	FL Zip Code 33327

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 *[Signature]*

DATE 06/12/03

**FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**DUE BY MAY 1**

9. MANAGING MEMBERS / MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PASTRANA, ANDRES 1378 VICTORIA ISLE DRIVE WESTON, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PASTRANA, REYNA 1378 VICTORIA ISLE DR WESTON, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CRZE083B (12/02)

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: *[Signature]*

DATE 06/12/03

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

Date

Daytime Phone #

Attachment

90148049  
#L00000013957

STEVEN F. SAMILOW, P.A.

ATTORNEY AT LAW

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(954) 349-6555

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July 17, 2003

Florida Department of State  
Division of Corporations  
Limited Liability Company Section  
P. O. Box 6478  
Tallahassee, FL 32314

**Re: AN & RE Investments, LLC**

Dear Sir or Madam:

I represent AN & RE Investments, LLC, which is a Florida limited liability company. My client did not receive its Uniform Business Report for the year 2003 and as a result, unintentionally failed to file said UBR as required by the May 1, 2003 deadline. Enclosed please find my client's original completed UBR for 2003 together with its check for the required annual fee of \$150.00. Based upon the foregoing, we request that the Department waive the penalty for the late filing of the UBR.

Thank you for your prompt attention to this matter.

Sincerely,

  
Steven F. Samilow, P. A.