

2002 UNIFORM BUSINESS REPORT (UBR)

000747

DOCUMENT # L00000014383

1. Entity Name

MARKETING EXPRESS INTERNATIONAL LLC

FILED

02 MAY 13 PM 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

3326 MARY ST., STE. 603
COCONUT GROVE FL 33133

Mailing Address

2665 SOUTH BAYSHORE DR., STE. 703
MIAMI FL 33133

2. Principal Place of Business
2833 Bird Avenue

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami, Florida

City & State

4. FEI Number 65-1062077

Applied For

Not Applicable

Zip
33133

Country
USA

Zip

Country

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

WORLD CORPORATE SERVICES, INC.
2665 S. BAYSHORE DR., STE. 703
MIAMI FL 33133

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.

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

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME NARANJO, EDUARDO
STREET ADDRESS 3326 MARY ST., STE. 603
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE Manager ☒ Change ☐ Addition
NAME Naranjo, Eduardo
STREET ADDRESS 2833 Bird Avenue
CITY-ST-ZIP Miami, Florida 33133

TITLE MGR ☐ Delete
NAME NARANJO, CARLOS M
STREET ADDRESS 3326 MARY ST., STE. 603
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE Manager ☒ Change ☐ Addition
NAME Navarro, Carlos Mauricio
STREET ADDRESS 2833 Bird Avenue
CITY-ST-ZIP Miami, Florida 33133

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Change ☐ 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:  Albert J. Lazo 4/30/02 (305) 858-990 0

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

Date

Daytime Phone #

CR2E083 (9/01)