2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State
04-04-2002 90087 017 ****50.00

DOCUMENT # L00000014920

1. Entity Name
1931-43/1945-55 SW 8TH ST., L.L.C.

Principal Place of Business
15472 SW 95TH LANE
MIAMI FL 33196

Mailing Address
15472 SW 95TH LANE
MIAMI FL 33196

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 4734 Eagle Rock Blvd.
Suite, Apt. #, etc
City & State: Los Angeles, California
Zip: 90041 Country: USA

3. Mailing Address: 4734 Eagle Rock Blvd.
Suite, Apt. #, etc
City & State: Los Angeles, California
Zip: 90041 Country: USA

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

~~MUINA, MARGARITA P ESQ~~
NEW WORLD TOWER, 21ST FLOOR
100 N. BISCAYNE BLVD
MIAMI FL 33132-2306

7. Name and Address of New Registered Agent

Name: Joaquin G. Molina P. A.
Street Address (P.O. Box Number is Not Acceptable): 10140 SW 40 St.
City: Miami FL Zip Code: 33165

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] (Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) DATE: 04/26/02

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	MGRM CURBELO, RAYMOND 15472 SW 95TH LANE MIAMI FL 33196	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM CURBELO, RAYMOND 4734 Eagle Rock Blvd. Los Angeles, California 90041	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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] RAYMOND CURBELO 03-27-02 (323) 254-2589

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #