

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000015284

1. Entity Name

VIP ROOM, LLC

FILED

01 JUN 13 AM 10:57

Principal Place of Business  
251 GRANDON BLVD.  
APT. # 726  
KEY BISCAYNE, FL. 33149

Mailing Address  
251 GRANDON BLVD.  
APT. # 726  
KEY BISCAYNE, FL. 33149

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2. Principal Place of Business  
251 GRANDON BLVD.  
Suite, Apt. #, etc.  
# 726

3. Mailing Address  
251 GRANDON BLVD.  
Suite, Apt. #, etc.  
APT. # 726

DO NOT WRITE IN THIS SPACE

City & State  
KEY BISCAYNE, FL.

City & State  
KEY BISCAYNE, FL.

4. FEI Number  
65-1061895

Applied For  
Not Applicable

Zip  
33149

Country

Zip  
33149

Country

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

## 6. Name and Address of Current Registered Agent

ISAZA, MARIA V.  
251 GRANDON BLVD. APT. # 726  
KEY BISCAYNE, FL. 33149

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)  
251 Grandon Blvd.  
Apt. # 726  
City Key Biscayne FL Zip Code 33149

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

800004423508--5  
-06/18/01--01012--013  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

## 9. MANAGING MEMBERS / MEMBERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

P  
PUERTA, ANGELA M.  
401 MIRACLE MILE, SUITE 109  
CORAL GABLES, FL. 33134 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VP  
ISAZA, MARIA V.  
401 MIRACLE MILE, SUITE 109  
CORAL GABLES, FL. 33134 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

S  
OROZCO, VICTOR E.  
401 MIRACLE MILE, SUITE 109  
CORAL GABLES, FL. 33134 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

## 10. ADDITIONS / CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

251 GRANDON BLVD. APT. # 726  
KEY BISCAYNE, FL. 33149 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

251 GRANDON BLVD. APT. # 726  
KEY BISCAYNE, FL. 33149 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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

06-06-01

Date

305-444-4797

Daytime Phone #

CR2E083 (11/00)