

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000015951
1. Entity Name
ORIGINAL 2645 ENTERPRISES LLC

FILED

01 MAY -1 PM 5:18

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business Mailing Address

2. Principal Place of Business
12900 SW 89 COURT
Suite, Apt. #, etc.

3. Mailing Address
12900 SW 89 COURT
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIAMI, FL

City & State
MIAMI, FL

Zip
33176

Country
USA

4. FEI Number
65-1065566

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

Name
BERKOWITZ, RICHARD A.


Street Address (P.O. Box Number is Not Acceptable)
ONE SOUTHEAST THIRD AVENUE

15TH FLOOR

City
MIAMI

FL Zip Code
33131

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  DATE **4/10/01**
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State


9. MANAGING MEMBERS/MEMBERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
MANAGING MEMBER	ROLANDO B. GARCIA	12900 SW 89 COURT	MIAMI, FL 33176		
MANAGING MEMBER	MARIA E. GARCIA	12900 SW 89 COURT	MIAMI, FL 33176		

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:  **Rolando B. Garcia** **4/25/01** **305-233-1322**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)