2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State
05-13-2002 90206 011 ****50.00

DOCUMENT # L01000000750

1. Entity Name
AZORRA PROPERTIES LLC

Principal Place of Business	Mailing Address
28 ISLA BAHIA DRIVE FORT LAUDERDALE FL 33316	28 ISLA BAHIA DRIVE FORT LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
408 S. Andrews Ave.	408 S. Andrews Avenue
Suite, Apt. #, etc. 200	Suite, Apt. #, etc. 200
City & State Ft Lauderdale, Fl	City & State Ft. Lauderdale, Fl
Zip 33301 Country	Zip 33301 Country

4. FEI Number N/A ☐ 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
EVANS, JOHN 28 ISLA BAHIA DRIVE FORT LAUDERDALE FL 33316	Name Evans John Street Address (P.O. Box Number is Not Acceptable) 408 S. Andrews Avenue Suite 200 City Ft. Lauderdale ~~Fla~~ FL Zip Code ~~33301~~ 33301

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 NAME STREET ADDRESS CITY-ST-ZIP	MGRM JOHN EVANS, PRESIDENT EVANS LEVEL I CORPORATION 562 E. JOHN Street, CARSON City NV 89706 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E083 (9/01)

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: John Evans 4-26-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #