2002 UNIFORM BUSINESS REPORT (UBR)

Apr 16, 2002 8:00 am Secretary of State DOCUMENT # L01000003550 04-16-2002 90077 038 ****50.00 CARIBBEAN PLUS BY LACONM, L.L.C. Principal Place of Business Mailing Address 225 DANIA BEACH BLVD., SUITE 207 225 DANIA BEACH BLVD., SUITE 207 DANIA FL 33004 DANIA FL 33004 3. Mailing Address 2. Principal Place of Busines 305 S DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1091045 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent IGLESIAS, VIRGINIA Street Addre 225 DANIA BEACH BLVD., SUITE 207 DANIA FL 33004 ity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named SIGNATURE of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 **Wake Check Payable to Department of State** Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE Change Addition CR2E083 (9/01 TITLE ☐ Delete MGR NAME NAME IGLESIAS, VIRGINIA ve. Suite 508. STREET ADDRESS STREET ADDRESS 225 DANIA BEACH BLVD., SUITE 207 CITY-ST-ZIP CITY-ST-ZIP DANIA FL 33004 TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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 ndicated 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

CITY-ST-ZIP

limited liability company