

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 14, 2002 8:00 am**  
**Secretary of State**

03-14-2002 90008 006 \*\*\*\*50.00

**DOCUMENT #** L01000004894

1. Entity Name

LUMABLA INVESTMENTS L.C.

**DO NOT WRITE IN THIS SPACE**

B0043048

2. Principal Place of Business  
338 Minorca Avenue

3. Mailing Address  
338 Minorca Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Coral Gables, FL

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Coral Gables, FL

4. FEI Number  
65-1143427

Applied For  
Not Applicable

Zip Country  
33134 U.S.

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33134 U.S.

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

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
International Registered Agents Corporation

Street Address (P.O. Box Number is Not Acceptable)  
338 Minorca Avenue

City Coral Gables FL Zip Code 33134

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 Maria Elena Cabeza, President  
Signature, typed or printed name of registered agent and title if applicable.

February 21, 2002  
DATE

**FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Mgr  
Bonilla, Luis  
Transversal 28 #118-57  
Bogota, Colombia

TITLE  
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CITY-ST-ZIP

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IN THIS SPACE**

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:**

Luis Bonilla, Manager

2/21/02

(305) 444-7282

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

Date

Daytime Phone #

CR2E083B (12/01)