

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90695 046 ****50.00

DOCUMENT # L01000004955

1. Entity Name

SANFRANSISCO TRADING ENTERPRISES, L.L.C.



Principal Place of Business

762 HADDONSTONE CIRCLE #202
HEATHROW FL 32746

Mailing Address

762 HADDONSTONE CIRCLE #202
HEATHROW FL 32746

2. Principal Place of Business

4669 W 12LO BRONSON HWY

3. Mailing Address

4669 W 12LO BRONSON HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

~~KISSIMMEE~~

~~KISSIMMEE~~

City & State

City & State

KISSIMMEE FL

KISSIMMEE FL

Zip

Country

Zip

Country

34746

USA

34746

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLER, SOUTH & MILHAUSEN, P.A.
C/O JEFFREY P. MILHAUSEN, P.A.
2699 LEE RD., STE. 120
WINTER PARK FL 32789

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

MUSTAFA YUSUFALI - OPERATIONS MANAGER

4/29/03

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 Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ESMAIL VIRJEE, GULAMALI
762 HADDONSTONE CIRCLE #202
HEATHROW FL 32746

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ESMAIL VIRJEE, GULAMALI
1202 FOX QUARRY LANE
SANDFORD FL 32773

☒ Change ☐ Addition

TITLE
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CITY-ST-ZIP

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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: *MUSTAFA YUSUFALI - OPERATIONS MANAGER*

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

4/29/03

Date

407 923 6999

Daytime Phone #

CR2E083 (10/02)