## **2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # L0100005259 1. Entity Name

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**FILED** Sep 11, 2003 8:00 am Secretary of State 09-11-2003 90043 002 \*\*\*\*50.00

Principal Place of	f Business	Mailing Address								
14-B PONCE DE LE CORAL GABLES FL		114-B PONCE DE LEO CORAL GABLES FL 33			1 (88)(8)	en seidi (2011 80511 8011)	1 <b>22</b> fil <b>24</b> lil <b>2612</b> l	<b>a</b> nis <b>a</b> ii <b>aa</b> i <b>a</b> ni	<b>ID</b> 1011 1001	
2. Principal Place	e of Business	3. Mailing Address								
Suite, Apt. #, e	etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State	<del></del>	City & State			4. FEI Numb	er <b>65-109564</b>	2	<del></del>	plied For	
Zip	Country	Zip	Count	try	5. Certificate	of Status Desired		5.00 Add		
	<u> </u>	, 						ee Require	<u> </u>	
	6. Name and Address of Curr	ent Hegistered Agent_		Name	7. Name and	Address of New I	Registered A	gent		
REPOSA	A, RICHARD A									
	ONCE DE LEON BLVD.	المنتقد المستعددات		<ul> <li>Street Address</li> </ul>	s (P.O. Box Numb	er is Not Acceptabl	e)			
CORAL (	GABLES FL 33135					·			<b>4-4</b> 1.	
								<del>,</del>		
				City			FL	Zip Code	9	
SIGNATURE	s of registered agent.	gent and title if applicable.		_	lead when coincisting)	<del>.</del>	DATE			
			(NOTE: Registered	d Agent signature requi	red when remstating?					
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