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

May 20, 2002 8:00 am Secretary of State DOCUMENT # L 01000005440 05-20-2002 90257 050 \*\*\*\*55.00 SOTO IMPORT & EXPORT COMPANY LLC 80102539 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business
4495 SW 67 TERRACE 3. Mailing Address 67 TERRACE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 203 203 SUITE Applied For FLOR IDA FLORIDA Not Applicable Country S \$5.00 Additional 33314 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent NAUT М. SOTO DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 20AD BRIAR RIDGE City WES TON the purpose of changing its registered office or registered agent, or both, in the State of Florida. JUAN M. SOTO Manager **SIGNATURE** \* FEE IS \$50.00 Make Check Payable to Department of State DUE BY MAY 1 MANAGING MEMBERS/MANAGERS 9. JUAN MANUEL SOTO, BRIAR RIDGE RD NAME NAME STREET ADORESS STREET ADDRESS FIORIDA 33327 CITY-ST-ZIP CITY-ST-7/P TITLE. THE F NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST+ZIP CITY - ST- 7IP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP THEF IN THIS SPACE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IIILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DILE NAME NAME STREET ADDRESS STREET ADDRESS 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 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 employed to execute this report as required by Chapter 608, Florida Statutes. **SIGNATURE** IG MANAGING MEWBER, MANAGER, OR AUTHORIZED REPRESENTATIV

**FILED**