

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90079 006 ****50.00

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DOCUMENT # L01000005889

1. Entity Name

PRO GROUP WORLDWIDE L.L.C.



Principal Place of Business

Mailing Address

**3038 NW 82 AVE.
MIAMI FL 33122**

**3038 NW 82 AVE.
MIAMI FL 33122**

2. Principal Place of Business

3. Mailing Address

7758 NW 46TH ST

7758 NW 46TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33166

Country

USA

Zip

33166

Country

USA

4. FEI Number

65-1099132

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ALAN AZPURUA, ALEJANDRO
3038 NW 82 AVE.
MIAMI FL 33122**

Name

ALAN AZPURUA

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

7758 NW 46TH ST

City

MIAMI

FL

Zip Code

33166

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

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
ALAN AZPURUA, ALEJANDRO
7621 N.W. 175TH ST.
MIAMI FL 33157** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**7758 NW 46TH ST
MIAMI, FL 33166** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
URDANETA, CARMEN
7621 N.W. 175TH ST.
MIAMI FL 33157** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CARMEN de AZPURUA
7758 NW 46TH STREET
MIAMI, FL 33166** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
DE AZPURUA, IRMA
AVENIDA JUAN DE CASTELLANOS, APT. 28-29B
MARGARITA ESTADO VENEZUELA** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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:

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

Date

Daytime Phone #

ALAN AZPURUA / 4-15-2003 / 305-718-8121

CR2E083 (10/02)