LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 30, 2002 8:00 am Secretary of State

04-08-02 7862466998

| DOCUMENT # 1. Entity Name FM CONSTRU | L 01 0000074 KETION & INVESTIM | 71 ENTS, LLC | 04-3 | 0-2002 90036 039 ****50.00 |
|--|---|--|---|--|
| DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 801 HW 27 AVE 801 NW 27 AVE | | | 9 4 6 3 6 2 | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | |
| City & State MIAMI FL | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | 4. FEI Number 65- / | 1040 14 Applied For Not Applicable |
| Zip Co | untry Zip Zip 33/25 | Country 4 | 5. Certificate of Status Desire | d S5.00 Additional Fee Required |
| | | Name | 7. Name and Address of Curr | ent Registered Agent |
| DO | NOT WRITE | | s (P.O. Box Number is Not Accept | ahlo) |
| IN " | THIS SPACE | Sout Address | TO, BOX Halmoch IS NOt Accept | , sole) |
| | | City | | Tio Code |
| | nits this statement for the purpose of chang | | | FL Zip Code |
| SIGNATURE Signature, typed or printe | ed name of registered agent and talle if applicable. Make Che | FEE IS \$50.00 CK Payable to Department | òf State | DATE |
| | | DUE BY MAY 1 | ** | |
| 9. TITLE PRESIDE | MANAGING MEMBERS/MANAGERS | ,TITLE , | | Š |
| NAME STREET ADDRESS (1/7/43 CITY-ST-ZIP MIAMI | F. MEGA GW 103 RJ. Ln. FK 33 176 | NAME STREET ADDRESS CITY-ST-ZIP | | CDSER878 (12)(14) |
| TITLE NAME SIREET ADDRESS CITY-ST-ZIP | | ,TITLE NAME STREET ADDRESS CLTY-ST, ZIP | | i G |
| TITLE | | NAME STREET ADDRESS CITY-ST-ZIP | DO NOT | WRITE |
| TITLE NAME SIREET ADDRESS CITY-ST-ZIP | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | IN THIS | SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | TITLE NAME STREET ADDRESS 2 CITY ST-21P | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| 11. I hereby certify that the inform | mation supplied with this filing does not qua te and accurrete and that my signature shall ne receiver or trusted empowered to execut | alify for the exemption stated in : | Section 119.07(3)(i), Florida Statuti f made under oath; that I am a ma puer 608, Florida Statutes. | 25. I further certify that the information naging member or manager of the |

MBER, MANAGER, OR AUTHORIZED REPRESENTATIVE