## FILED Jun 04, 2002 8:00 am Secretary of State 06-04-2002 90201 015 \*\*\*\*50.00

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # L01000008561  1. Entity Name   |  |   |                                  |  |   |  |
|---|--|---|----------------------------------|--|---|--|
| Weiser & Sons, LLC  |  |   |                                  |  |   | •  |
| DO NOT WRITE IN THIS SPACE  2. Principal Place of Business 3. Mailing Address 3. Mailing Address 3. Mailing Address |  |   |                                  |  | 968435  |  |
| 3250 Mary Street  # 500   |  | 3250 Mary Street  # Suite Apt. #. etc. # 500  |                                  | DO NOT WRITE IN THIS SPACE               |   |  |
| Miami, Florida  |  | - MianifieFlorida   |                                  | - 4.2FEI Number CF_110070F               |   |  |
| Zip Country 33133 USA   |  | Zip<br>33133  | Country<br>USA                   |  | .65–1109785  5. Certificate of Status Desired   | \$5.00 Additional                                |
|   |  |   |                                  |  | 7. Name and Address of Current Registere  | Fee Required d Agent                             |
| DO NOT WRITE  |  |   |                                  | Street Action (FWest NFT ag 12 fc Street |   |  |
| IN THIS SPACE   |  |   |                                  |  | te 2200   |  |
|   |  |   |                                  |  | Miami. FL 33130   |  |
| 8. The above  | named entity submits this statement  | for the purpose of changin  | ng its registere                 | ed office or registen                    | ed agent, or both, in the State of Florida.   |  |
| SIGNATURE.  | Signature, typed or printed name of registered ag-   | епі анстіне ії аррасавію.   |                                  |  | DATE  | <u> </u>   |
|   |  | Make Checi  | FEE IS<br>k Payable to<br>DUE BY | o Department of                          | State   |  |
| 9.<br>Title   | MANAGING MEM Managing Member   | BERS/MANAGERS   | TITLE                            |  |   |  |
| NAME<br>STREET AUDRESS<br>CIEY+ST-ZIP   | Sherwood Weiser 3250 Mary Street # 500 Miami, Florida 33133  |   |                                  | ET ADDRESS<br>ST-ZIP                     |   | 338 (42)0  |
| TETEE<br>Name   | -MidHi, Froctod 3.   | 3133  | MTHLE<br>NAME                    | ****                                     |   |  |
| STREET ADDRESS<br>CITY ST-ZIP   |  |   | SIREI                            | T ADDRESS<br>ST 7IP                      |   |  |
| TITLE<br>NAME   |  |   | TITLE<br>NAME                    |  |   |  |
| STREET ADDRESS<br>CITY -ST- ZIP   |  |   | STREE                            | T ADDRESS<br>S1-719                      | DO NOT WRI  | TE   |
| THEE<br>NAME  |  |   | TITLE<br>NAME                    |  | IN THIS SPACE   |  |
| STREET ADDRESS<br>CITY-ST-ZIP   |  |   | STREE                            | T ADDRESS<br>St. ZIP                     |   |  |
| THLE  |  |   | TITLE                            |  |   |  |
| STREET ADDRESS<br>CITY-ST-ZIP   |  |   | SIREE                            | T ADDRESS<br>ST-ZIP                      |   |  |
| TITLE<br>NAME   |  |   | TITLE                            |  |   |  |
| STREET ADDRESS<br>CHY-ST-ZIF  |  |   | STREE                            | T ADDRESS<br>STAZIP                      |   |  |
| 11. Thereby co-<br>indicated of<br>limited liab   | ently that the information supplied with this report is true and accurate an illiting company or the receiver or trust | th this filing does not qualiful that my signature shall have empowered to execute to | v for the even                   | inting stated in Sec                     | tion 119.07(3)(i), Florida Statutes. I further cert<br>ide under oath; that I am a managing member<br>ir 608, Florida Statutes. | ify that the information<br>or or manager of the |
| SIGNATURE: Managing Member 5/28/2002 (305) 445-2493   |  |   |                                  |  |   |  |