

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90261 026 ***150.00

DOCUMENT # L01000009236

1. Entity Name

PERU NET REAL ESTATE DEVELOPERS, LLC

Principal Place of Business

**14936 SW 104TH STREET # 23
 MIAMI FL 33196**

Mailing Address

**14936 SW 104TH STREET # 23
 MIAMI FL 33196**

2. Principal Place of Business

14936 SW 104 St

Suite, Apt. #, etc.

23

3. Mailing Address

14936 SW 104 St

Suite, Apt. #, etc.

23

City & State

Miami, FL

City & State

Miami, FL

Zip

33196

Country

USA

Zip

33196

Country

USA

4. FEI Number

65-1124658

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LEONARDO, JOSE J ESQ.
 12515 N. KENDALL DRIVE SUITE 222
 MIAMI FL 33186**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

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 Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
 NAME **DE SOSA, JUAN**
 STREET ADDRESS **1110 BRICKELL AVE. SUITE 504**
 CITY-ST-ZIP **MIAMI FL 33131**

TITLE **MGR** ☐ Delete
 NAME **RIOS, RAFAEL**
 STREET ADDRESS **14936 SW 104TH STREET # 23**
 CITY-ST-ZIP **MIAMI FL 33196**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

10. ADDITIONS/CHANGES

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

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

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

LEONARDO, JOSE J ESQ.

JAN. 10.02

305.525.1083

CR2E083 (9/01)