2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000010734

1. Entity Name

MS MARK, LLC



FILED Feb 25, 2003 8:00 am Secretary of State 02-25-2003 90083 047 ****50.00

1	in, Leo		V)				
1 .	ace of Business IN REMO AVE. ES FL 33146	Mailing Address C/O 1500 SAN REMO AV SUITE 177 CORAL GABLES FL 33146							
2. Principal	Place of Business	3. Mailing Address	<u></u> _						
Suite, Apt	t # etc					11011 011 00161 11011 00111 11 0111 0		10 (11) 0 10 3	
		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State		4. FEI Nun	nber 65-1133783		Applied For Not Applicabl		
Zíp	Country	Zip	Coun	itry	5. Certifica	ate of Status Desired	\$5.00	dditional	
	6. Name and Address of Curren	t Registered Agent	4		7. Name a	nd Address of New Reg	Fee Requ	ired	
DAI	DED DARIO O ECO			Name		7,11011 110	natorea Agent		
C/0	RED, PABLO R ESQ.) 1500 SAN REMO AVE.		Street Address (P.O. Box Number is Not Acceptable)			
	ite 177 Ral Gables FL 33146		ŀ						
<u>.</u>				City			FL Zip Co		
8. The above the obligat	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	registere	d office or registe	ered agent, or b	ooth, in the State of Florid	a. I am familiar with	n, and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	Agent signature require	d when reinstation)		DATE		
•					a whombataling)		DATE		
•		Make Check Payer	JWIII F	EE IS \$50.00					
		Make Check Payabl		rida Departme y 1, 2003	ent of State				
9.	MANAGING AGUS			y 1, 2003					
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NAME	SANCHEZ, MONICA	☐ Delete	TITLE	ľ			☐ Change	Addition	
,	OF INCHION		NAME	T ADDRESS					
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powered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: