2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000011214

1. Entity Name

GIRRALTER FACILITIES SVCS. CO. LLC



FILED Jan 08, 2003 8:00 am Secretary of State 01-08-2003 90119 024 ****50.00

·	. 220	'						
Principal Place of Business				1				
VO 110 10 111 - 110 -				20000577				
ce of Business	3. Mailing Address	we a	·					
, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		[CHECK HERE	IF MAKING	CHANGES	
City & State		City & State		4. FEI Number	11-267767	7 /	<u>_</u>	oplied For
Country	Zip	Country	i	5. Certificate o	f Status Desired		\$5.00 Add	ditional
6. Name and Address of Current Registered Agent		1		7. Name and A	ddress of New F		<u>.</u>	-
			Name					-
ELEGGIO, GLORIA CPA 204-22 NW 55 CT MIAMI FL 33055		Street Address		(P.O. Box Number	is Not Acceptable	e)		
			City				Zip Cod	e
			•					
named entity submits this statem ins of registered agent.	ent for the purpose of changing it	is registered	office or registe	red agent, or both	in the State of Fi	orida. Tam f	amiliar with,	and accept
ignature, typed or printed name of registered	d agent and title if applicable. (NO	TE: Registered A	Agent signature require	d when reinstating)		DATE		
	Make Check Payal	ble to Flor	ida Departme	ent of State				
MANAGING M	I EMBERS/MANAGERS	10.			ADDITIONS	/CHANGES		
P		TITLE					Change	Addition
SALOMONE, HECTER V		NAME						
500 NE 10TH AVE.			,					
			1-219					
	☐ Delete						☐ Change	☐ Addition
•			ADDRESS					
								j
S:====================================	Delete:	TITLÉ					☐ Change	Addition
LEGGIO, FRANK		NAME						
204 22NW 55CT								
MIAMI FL 33055		CITY-S	T-ZIP					F
	☐ Delete	TITLE						Addition
			ADDRESS					'
		CITY-S						
		T)T) C					☐ Change	☐ Addition
	☐ Delete	TITLE	l				~	
	☐ Delete	NAME						
	☐ Delete	NAME	ADDRESS					
	☐ Delete	NAME				18,1		
	☐ Delete	NAME Street					Change	☐ Addition
		NAME STREET CITY-S TITLE NAME	T-ZIP				Change	☐ Addition
		NAME STREET CITY-S TITLE NAME	T-ZIP ADDRESS				Change	☐ Addition
	Country 6. Name and Address of Cu 10, GLORIA CPA 2 NW 55 CT FL 33055 amed entity submits this statement of registered agent. MANAGING M P SALOMONE, HECTER V 500 NE 10TH AVE. FORT LAUDERDALE FL 33: VP UZCATEGUI, CRISTINA 2728 SCOTT ST. HOLLYWOOD FL 33020 S LEGGIO, FRANK	So NE 10 AVENUE FIL 33301 See of Business Get of Busine	SOO NE 10 AVENUE FT LAUDERDALE FL 33301 Dee of Business 3. Mailing Address etc. Suite, Apt. #, etc. City & State Country 2ip Country 6. Name and Address of Current Registered Agent O, GLORIA CPA 2 NW 55 CT FL 33055 amed entity submits this statement for the purpose of changing its registered agent and stile if applicable. (NOTE: Registered agent.) FILE NOW!!! FE Make Check Payable to Flor Due By May MANAGING MEMBERS/MANAGERS P SALOMONE, HECTER V SOO NE 10TH AVE. FORT LAUDERDALE FL 33301 VP UZCATEGUI, CRISTINA 2728 SCOTT ST. HOLLYWOOD FL 33020 STREET HOLLYWOOD FL 33020 Delete TITLE NAME 10 Delete 11 TILE NAME 12 STREET 11 Delete 11 TILE NAME 12 STREET 11 Delete 11 TILE NAME 12 STREET 13 STREET 14 DELETE 15 DEL	SOO NE 10 AVENUE FT LAUDERDALE FL 33301 The of Business	Soo NE 10 AVENUE FT LAUDERDALE FL 33301 To of Business 3. Mailing Address etc. City & State Country Zip Country S. Certificate o 6. Name and Address of Current Registered Agent O, GLORIA CPA 2 NW 55 CT FL 33055 City amed entity submits this statement for the purpose of changing its registered office or registered agent, or both, ns of registered agent. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS P SALOMONE, HECTER V SOO NE 10TH AVE. FORT LAUDERDALE FL 33301 VP UZCATEGUI, CRISTINA 2728 SCOTT ST. HOLLYWOOD FL 33020 S Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP UZCATEGUI, CRISTINA 2728 SCOTT ST. HOLLYWOOD FL 33020 S Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP UTILE NAME STREET ADDRESS STREET ADDR	So NE 10 AVENUE FT LAUDERDALE FL 33301 2 0 0 0 5 Co of Business 3. Mailing Address City & State Country Zip Country Size Country Country Size Apt. #, etc. Check Here City & State Country Size Country Size Apt. #, etc. Country Size Country Size Country Size Apt. #, etc. Country Size Country Size Country Size Apt. #, etc. Chy Size Address of Current Registered Agent Thame and Address of New Invariant Country City Size Address (P.O. Box Number is Not Acceptable City City City City City City City Size Address (P.O. Box Number is Not Acceptable City City City City Size Address (P.O. Box Number is Not Acceptable City City City City Size Address (P.O. Box Number is Not Acceptable City FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS 10. ADDITIONS P SIZE ADDRESS CITY-SI-2IP VP Delete ITILE NAME SIZE ADDRESS CITY-SI-2IP SIZE ADDRESS CITY-SI-2IP SIZE ADDRESS CITY-SI-2IP Delete ITILE NAME NAME SIZE ADDRESS CITY-SI-2IP Delete ITILE NAME NAME NAME	Soo NE 10 AVENUE FT LIQUERDALE FL 33301 2009577 200957 200957 200957 20095	## 1 33001 ## 1 33001 ## 1 33001 ## 1 33001 ## 1 33001 ## 1 33001 ## 1 33001 ## 1 33001 ## 1 33001 ## 1 33001 ## 1 33001 ## 1 300

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