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FILED
May 01, 2002 8:00 am
Secretary of State

04-03-2002 90018 002 ****50.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000012717

1. Entity Name
BROD USA, L.L.C.

Principal Place of Business
**1001 BRICKELL BAY DRIVE
SUITE 2908
MIAMI FL 33131**

Mailing Address
**C/O STEVEN L. CANTER, P.A.
1001 BRICKELL BAY DRIVE, SUITE 2908
MIAMI FL 33131**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SLC CORPORATE SERVICES, INC.
1001 BRICKELL BAY DRIVE
SUITE 2908
MIAMI FL 33131**

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

10.

ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
RICICA, JAN
1001 BRICKELL BAY DRIVE
MIAMI FL 33131**

☐ Delete

TITLE
NAME
STREET ADDRESS
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CITY-ST-ZIP

☐ Change

☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

SIGNATURE REQUIRED

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

3/24/02

Date

305-374-2884

Daytime Phone #

CR2E083 (9/01)