

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000013751

1. Entity Name

GRAND KEY ESTATES, L.C.

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90408 049 ****50.00

Principal Place of Business

1101 BRICKELL AVENUE NORTH TWR. STE 300
MIAMI FL 33131

Mailing Address

1101 BRICKELL AVENUE NORTH TWR. STE 300
MIAMI FL 33131

968001

2. Principal Place of Business

1101 Brickell Avenue, South Tower

3. Mailing Address

1101 Brickell Avenue, South Tower

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 400

Suite 400

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33131

Country

U.S.A

Zip

33131

Country

USA

4. FEI Number

65-1141600

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MURAI WALD BIONDO & MORENO, P.A.
900 INGRAHAM BUILDING
25 S.E. 2ND AVENUE
MIAMI FL 33131

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 reinstalling)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE **MEMBER** ☐ Delete
NAME **GRANDDEVELOPERS HOLDING CORP.**
STREET ADDRESS **1101 BRICKELL AVENUE, SUITE 400**
CITY-ST-ZIP **South Tower, MIAMI, FL 33131**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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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

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:

SIGNATURE REQUIRED

Jorge Ortega Trujillo

05/14/02 305-377-0390

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

Date

Daytime Phone #

CR2E083 (9/01)