

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 02, 2002 8:00 am**  
**Secretary of State**

09-02-2002 90047 036 \*\*\*\*50.00

**DOCUMENT # L01000014103**

1. Entity Name  
**SERVITEC, LLC**

✓

Principal Place of Business  
**% EINAR VIVAS IZQUIERDO**  
**1531 ESTANCIA CIRCLE**  
**FT. LAUDERDALE FL 33327-9999**

Mailing Address  
**% EINAR VIVAS IZQUIERDO**  
**1531 ESTANCIA CIRCLE**  
**FT. LAUDERDALE FL 33327-9999**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-1132304**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**IZQUIERDO, EINAR VIVAS**  
**1531 ESTANCIA CIRCLE**  
**FT. LAUDERDALE FL 33327-9999**

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. I am familiar with, and accept the obligations of registered agent.

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 September 25, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Delete  
NAME **IZQUIERDO, EINAR VIVAS**  
STREET ADDRESS **1531 ESTANCIA CIRCLE**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33327-9999**

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

TITLE **MGR** ☐ Delete  
NAME **OVIEDO, JUAN A**  
STREET ADDRESS **1531 ESTANCIA CIRCLE**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33327-9999**

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

TITLE **MGR** ☐ Delete  
NAME **AYERBE, JUAN JOSE**  
STREET ADDRESS **1531 ESTANCIA CIRCLE**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33327-9999**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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CITY-ST-ZIP

TITLE ☐ Delete  
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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:

**SIGNATURE REQUIRED**

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

**08/27/02**

**(954) 349-6419**

Date

Daytime Phone #

CR2E083 (4/02)