

2002-2003
**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000015216

1. Entity Name

Mariluz Gonzalez LLC

FILED

03 APR 11 PM 3:04

CLERK OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2000 Springdale Blvd

3. Mailing Address

2000 Springdale Blvd.

Suite, Apt. #, etc.

F 2006

Suite, Apt. #, etc.

F 2006

City & State

Palm Springs, FL

City & State

Palm Springs, FL

4. FEI Number

65-1146751

Applied For

Not Applicable

Zip

33461

Country

Palm Beach

Zip

33461

Country

Palm Beach

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Mariluz Gonzalez

Street Address (P.O. Box Number is Not Acceptable)

2000 Springdale Blvd

F 2006

City

Palm Springs

FL

Zip Code

33461

**DO NOT WRITE
IN THIS SPACE**

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.

700015480007

04/08/03--01075--029 **50.00

FEE IS

Make Check Payable

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Mgrm
Mariluz Gonzalez
2000 Springdale Blvd. F 2006
Palm Springs, FL 33461

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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CITY-ST-ZIP

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IN THIS SPACE**

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

Mariluz Gonzalez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

Date

4/1/03

Daytime Phone #

561-963-1003

CR2E083B (12/01)

April 1, 2003

Aliane Cushings
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

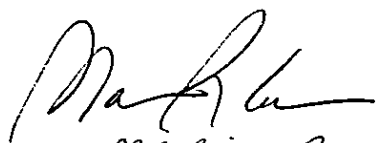
Dear Ms. Cushings:

Attached please find the Reinstatement
form for Mariluz Gonzalez LLC, L01000015216

As we discussed, for some reason
the forms are not there but she
mailed them with a check for 2002.

Enclosed is the check for 2003 per
your instructions.

Thank you for your assistance.



MARIA R. CORSO
561-963-1003

P.S. I also attached my prior correspondence.

December 16, 2002

file

Department of State
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

RE: Mariluz Gonzalez
Mariluz Gonzalez, LLC
2000 Springdale Blvd., Apt F206
Palm Springs, FL 33461-6375
L01000015216

To Whom It May Concern:

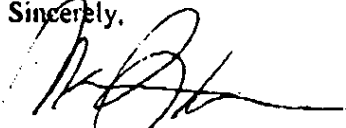
I am writing this letter on behalf of Mariluz Gonzalez, registered agent for Mariluz Gonzalez, T.I.C. She received a Certificate of Administrative Dissolution or Revocation form in the mail, but she does not wish to have the corporation dissolved. She never received the documentation to pay the \$50.00 for the annual fee.

I spoke to Gretchin in your office and explained the situation and she instructed me to write to your office, have Miss Gonzalez fill out the form and mail in the \$50.00 (enclosed).

If you have any questions, my name is Maria R. Corso and I can be reached at 561-625-9296.

Thank you in advance.

Sincerely,



Maria R. Corso