## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 09, 2003 8:00 am Secretary of State 04-09-2003 90044 018 \*\*\*\*50.00

DOCUMENT # L01000016009  1. Entity Name GRAND OCEAN L.C.					04-09-2003 90044 018 ****50.00 <b>30034133</b>	
	DO NOT WRITE	IN THIS S	SPAC	E	Lacord	
Principal Place of Business     18839 BISCAYNE BLVD     Suite, Apt. #, etc.		3. Mailing Address 18839 BISCAYNE BLVD Suite, Apt. #, etc.		D	DO NOT WRITE IN THIS S	PACE
City & Stat	e IRA, FL	City & State AVENTURA, FL	ry & State /ENTURA, FL		4. FEI Number 82-0576500	Applied For Not Applicable
2ip Country — 33180 U.S.		33180	U.S.		5. Certificate of Status Desired	5.00 Additional
	1-1-1	1 33.33	1 3.0	***************************************	7. Name and Address of Current Registered	
DO NOT WRITE				Name ANTONIO GARCIA		
				Street Address (P.O. Box Number is Not Acceptable)		
IN THIS SPACE				2588 SW 27	TH AVE.	
				City MIAMI	FL	Zip Code 33133
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.  3/1.9/0.3						
Signature, typed or printed name of registered agent and title if applicable.  DATE						
FEE IS \$50.00  Make Check Payable to Florida Department of State  DUE BY MAY 1						
9. TITLE	MANAGING MEMBE	RS/MANAGERS	BILE			į (
NAME STREET ADDRESS CITY-ST-ZIP	MGR VIVES, MAURICIO 18839 BISCAYNE BLVD. AVENTURA, FL			ET ADDRESS ST-ZIP		77.77
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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.						