

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 13, 2002 8:00 am**  
**Secretary of State**

05-13-2002 90256 044 \*\*\*\*55.00

DOCUMENT # L01000017804

1. Entity Name

ALPER TRADE LLC

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3550 Biscayne Blvd.  
Suite, Apt. #, etc.  
604

3. Mailing Address

3550 Biscayne Blvd.  
Suite, Apt. #, etc.  
604

DO NOT WRITE IN THIS SPACE

City & State  
Miami, Florida

City & State  
Miami, Florida

4. FEI Number  
65-1153054

Applied For  
Not Applicable

Zip  
33137

Country  
USA

Zip  
33137

Country  
USA

5. Certificate of Status Desired ☒ **\$5.00 Additional  
Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
PEREIRA, Alejandro Jose

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

3550 Biscayne Blvd. Suite 604

City  
MIAMI

FL Zip Code  
33137

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

04-29-2002  
DATE

FEE IS \$50.00

Make Check Payable to Department of State  
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
M/M  
PEREIRA, Alejandro Jose PEREIRA  
3550 Biscayne Blvd. Suite 604  
Miami, Florida

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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CITY - ST - ZIP

**DO NOT WRITE  
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)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Do Not Sign Here

04-29-2002

305-586-8442

CR2E083B (12/01)