

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

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90022 012 ****50.00

DOCUMENT # LO1000018323 ✓

1. Entity Name

WEALTH POSSIBILITIES GROUP, LLC

951629

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1475 NW 192ND TERRACE

Suite, Apt. #, etc.

N/A

City & State

MIAMI, FL 33169

Zip

33169

Country

USA

3. Mailing Address

1475 NW 192ND TERRACE

Suite, Apt. #, etc.

N/A

City & State

MIAMI, FL 33169

Zip

33169

Country

USA

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

BASIL L. DALLAS, Sr.

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

1475 NW 192ND TERRACE

City

MIAMI

FL

Zip Code

33169

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]
Signature, typed or printed name of registered agent and title if applicable.

BASIL L. DALLAS, Sr.

APRIL 24, 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	CEO BASIL L. DALLAS, Sr. 1475 NW 192 Terrace MIAMI, FL 33169	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT LEN JOHNSON 1475 NW 192 Terrace, Miami	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER GAIL DANIELS 1475 NW 192 Terr, Miami, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY CHANTAL GOULDBOURNE 1475 NW 192 Terr, Miami, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

BASIL L. DALLAS, Sr.

04/24/02 305-655-0013

CR2E083B (12/01)