

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000019592

FILED
Apr 26, 2002 8:00 AM
Secretary of State

Entity Name: PINART, L.L.C.

Current Principal Place of Business:

901 PONCE DE LEON BLVD.
SUITE 603
CORAL GABLES, FL 33134

New Principal Place of Business:

10354 NW 55TH STREET
SUNRISE, FL 33351

Current Mailing Address:

901 PONCE DE LEON BLVD.
SUITE 603
CORAL GABLES, FL 33134

New Mailing Address:

10354 NW 55TH STREET
SUNRISE, FL 33351

FEI Number: 01-0588702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALBORNOZ, WILLIAM H
901 PONCE DE LEON BLVD.
SUITE 603
CORAL GABLES, FL 33134

Name and Address of New Registered Agent:

FERNANDEZ, LUIS G
11031 NW 45TH TERRACE
MIAMI, FL 33178

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: LUIS G FERNANDEZ

04/26/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: PARDO, JOSE A
Address: 901 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: FERNANDEZ, LUIS G
Address: 901 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PARDO, FRANCISCO J
Address: 1266 CANARY ISLAND
City-St-Zip: WESTON, FL 33327

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: FRANCISCO J PARDO

MGR

04/26/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date