

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

DOCUMENT # L01000019667

1. Entity Name

MCEP, L.L.C.



FILED

03 APR -9 AM 7:14

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3215 N.E. 184 ST.

Suite, Apt. #, etc.
14103

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

Zip
33160

Country
MIAMI-DADE

Zip

Country

4. FEI Number

65-1153605

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

LAURENTINO ORTEGA

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

3215 N.E. 184 ST. APT. 14103

City

MIAMI

FL

Zip Code
33160

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.

SIGNATURE

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. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
GUILLERMO, MARTHA
3215 N.E. 184 ST. APT. 14103
MIAMI, FL 33160

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
ORTEGA, LAURENTINO
3215 N.E. 184 ST. APT. 14103
MIAMI, FL 33160

TITLE
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CITY- ST- ZIP

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04/09/03--01068--006 **50.00

**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)(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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/07/03

Date

305-553-8080

Daytime Phone #

CR2E083B (12/02)