

# LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

142

DOCUMENT # L01000020227

1. Entity Name

ALTAMIRA INVESTMENTS LLC.

02 NOV 14 AM 9:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

16851 SW 5th Court

Suite, Apt. #, etc.

3. Mailing Address

16851 SW 5th Court

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, Florida

City & State

Miami, Florida

4. FEI Number

65-1156320

Applied For

Not Applicable

Zip

Country

Zip  
33326

Country

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

FENDER, BRIAN J

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

501 E. KENNEDY AVENUE, SUITE 1700

City

MIAMI

FL

Zip Code  
33602

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.

FEE IS \$50.00

Make Check Payable to Department of State

DUE BY MAY 1

300008414815-9  
-10/17/02--01006--001  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Managing Partner  
Hernan Berchloff  
16851 SW 5th Ct  
Weston, FL 33326

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Managing Partner  
OSCAR BARCO  
250 SW 159 WAY  
Sunrise, FL 33326

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
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)(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:

Hernan Berchloff

10/9/02

305-298-2572

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/01)

20/2

ALTAMIRA INVESTMENTS LLC.  
16851 SW 5<sup>TH</sup> COURT  
WESTON, FL 33326

October 9, 2002

Division of Corporations  
Registration Section  
P.O. 6327  
Tallahassee, Florida 32314

Dear Representative:

Enclosed please find the Uniform Business Report (UBR) for Altamira Investments LLC. for processing. I have also enclosed a check in the amount of \$50.00 to cover the filing fee. We respectfully request the waiver of the late filing fee due to the fact that the original Business Report was not received.

The Uniform Business Report was being sent to an incorrect mailing address. The correct mailing address for Altamira Investments LLC is as follows:

Altamira Investments LLC.  
16851 SW 5<sup>th</sup> Court  
Weston, FL 33326

Thank you for your assistance in resolving this matter, if you have any questions or require additional information, please do not hesitate to contact Hernan Beschiroff at 305-298-2572.

Sincerely

  
Hernan Beschiroff