

2002

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90609 008 ****50.00

DOCUMENT # L01000020641

1. Entity Name

MABU, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9540 N.E. 2 Ave

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

4. FEI Number

65-1158082

Applied For

Not Applicable

Zip

33138

Country

USA

Zip

Country

5. Certificate of Status Desired

☐\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

GUIDO SANDEL

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

6969 COLLINS Ave # 615

City

MIAMI BEACH

FL

Zip Code

33141

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IN THIS SPACE

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.

DATE

4/24/02.

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	PRESIDENT ARTURO NEUBERGER 6969 COLLINS Ave # 615 MIAMI BEACH, FL 33141.	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT GUIDO SANDEL 6969 COLLINS Ave # 615 MIAMI BEACH, FL 33141	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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:

4/24/02.