

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

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

05-03-2002 90022 042 ****50.00

DOCUMENT # L01000020778

1. Entity Name

WESTON INVESTMENTS LLC

DO NOT WRITE IN THIS SPACE

951649

2. Principal Place of Business

2625 EXECUTIVE PARK DR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5

DO NOT WRITE IN THIS SPACE

City & State
WESTON FL

FL

City & State

4. FEI Number

26-0020795

Applied For

Not Applicable

Zip
33331

Country
USA

Zip

Country

5. Certificate of Status Desired

\$5.00 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

GASTON REBOREDO

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

2566 JARDIN WAY

City

WESTON

FL

Zip Code

33327

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

[Handwritten Signature]

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

4/23/2002

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
MANAGING MEMBER
EUGENIO LASCURAIN
2625 EXECUTIVE PARK DR. #5
WESTON, FL 33331

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
MANAGING MEMBER
GASTON REBOREDO
2566 JARDIN WAY
WESTON, FL 33327

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CITY-ST-ZIP

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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:

[Handwritten Signature]

GASTON REBOREDO

4/23/02 EXT-205 (954)3493391

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

Date

Daytime Phone #

CR2E083B (12/01)