

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

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90970 010 ****50.00

DOCUMENT # L01000020928

1. Entity Name

TRANSAMERICAN RAC, L.L.C.

DO NOT WRITE IN THIS SPACE

80057442

2. Principal Place of Business

3440 HOLLYWOOD BLVD,

Suite, Apt. #, etc.

360

City & State

HOLLYWOOD, FL

Zip

33021

Country

USA

3. Mailing Address

3440 HOLLYWOOD BLVD

Suite, Apt. #, etc.

360

City & State

HOLLYWOOD, FL

Zip

33021

Country

USA

4. FEI Number

60-0000182

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

LEONARDO A. ROTH

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

3440 HOLLYWOOD BLVD, SUITE 360

City

HOLLYWOOD

FL

Zip Code

33021

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

3/19/02

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

MGRM

AMATO, JORGE

3440 HOLLYWOOD BLVD, STE 360

HOLLYWOOD, FL 33021

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

MGRM

PRIETO, WIS P.

3440 HOLLYWOOD BLVD, STE 360

HOLLYWOOD, FL 33021

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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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:

WIS PRIETO, MGRM

3/19/02

954-322-4280

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

Date

Daytime Phone #

CR2E083B (12/01)