

2002-2003  
**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000021344

1. Entity Name

TEKTIME, L.C.



192  
FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 JUN 30 AM 9:42

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

19380 COLLINS AVE

Suite, Apt. #, etc.

820

City & State

SUNNY ISLES, FL

3. Mailing Address

19380 COLLINS AVE

Suite, Apt. #, etc.

820

City & State

SUNNY ISLES, FL

4. FEI Number

65-1159888

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

SPIEGEL & UTRERA, P.A.

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

1840 SW 22 STREET

4TH FLOOR

City

MIAMI

FL

Zip Code

33145

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  
PRESIDENT  
LUIZ CLAUDIO SILVA  
19380 COLLINS AVE. #820  
SUNNY ISLES, FL 33160

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
300021181873  
06/30/03-01002-015 \*\*100.00

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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:

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

6-16-2003 305 792-9006

Date

Daytime Phone #

CR2E083B (12/02)

Attachment

2 of 2

#



**Division of Corporations:**

Tektime did not receive the EBR form in 2002, so we are submitting both 2002 & 2003 UBR's.

Please, make sure our status is active under your records.

Regards,

Luiz Claudio Silva  
President  
Tektime, L.C.

A handwritten signature in black ink, appearing to read "Luiz Claudio Silva", written in a cursive style.

TEKTIME, L.C.  
19380 COLLINS AVENUE SUITE 820  
SUNNY ISLES BEACH, FL 33160