LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

L01000021474

DOCUMENT #

1. Entity Name

FILED Mar 26, 2002 8:00 am Secretary of State 03-26-2002 90097 012 ****50.00

THE GILMAR COMPANY, L.L.C.		
DO NOT WRITE IN THIS SP. 2. 'Principal Place of Business 3. Mailing Address	ACE 933639	
2. Principal Place of Business Suite, Apt. #, etc. 3. Mailing Address Suite, Apt. #, etc.	U 57 C. T DO NOT WRITE IN THIS SPACE	
CORAL GABLES, PL City & State GATS Zip Country A Zip	Recording to the second of Status Desired Status De	icable
DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Ngt Acceptable)	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Signature. Signature. Signature. DAY DAY DAY DAY DAY Signature. DAY DAY DAY DAY DAY DAY DAY DA		
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 CORAL GABLES, FL 33156	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CR2E083B (12/01)
TITLE NAME STREET ADDRESS CITY-ST-ZIP THE PROPERTY OF THE PRO		CR2E
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ITILE IAME ITREET ADDRESS ITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP ne exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information in the information is a section 119.07(3)(ii), Florida Statutes.	

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: SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE