LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

L01000021568

DOCUMENT#

ALHAMBRA ASSOCIATES, L.C.

1. Entity Name

FILED Feb 24, 2002 8:00 am Secretary of State

02-24-2002 90085 008 ****50.00

927818

DO NOT WRITE IN THIS SPACE

	Place of Business	3. Mailing Address					
7599	N.W. 7th STREET	7599 N.W. 7	9 N.W. 7th STREET				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
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City & Sta	te	City & State		- A F	FEI Number	Applied For	
,		_			90-0004897	Not Applicable	
Zip	Country	Zip	Country	5. (Dertificate of Status Desired	\$5.00 Additional	
33126	USA	33126	USA				
s mineral			<u> </u>	7. Name and Address of Current Registered Agent			
			Name	Name FRANCISCO A. ESPINOSA			
DO NOT WRITE			·	·			
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	IN THIS SP	ACE					
% No. 1		 		7599 N.W. 7th STREET			
		•	City			Zip Code	
n".			City MIAMI FL Zip Code 33126				
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.							
	1100-		g				
FRANCISCO A. ESPINOSA 2/13/02							
SIGNATURE Signature, typed or printed name of registered agent and title il applicable.							
							
FEE IS \$50.00							
Make Check Payable to Department of State							
		, , 0	UE BY MAY 1	* .			
9.	MANAGING MEMBE	DO /MANIA CEDO		· 4			
		13/ MANAGENS		·····			
TITLE	PRESIDENT	TITLE,					
NAME	JOEL PERR		NAME				
STREET ADDRESS	1000 GAMMA DRIVE	STREET ADDRESS	9				
CITY-ST-ZIP	PITTSBURGH, PA 15	CITY-ST-ZIP	CITY-ST-ZIP ,				
TITLE	VICE-PRESIDENT						
NAME	773 M G T C C C C C C C C C C C C C C C C C C						
STREET ADDRESS	17500 N W 7 CODD DOM			*			
CITY-ST-ZIP	MIAMI DIODIDA 22126			and the state of	the state of the s	- Carried State St	
		<u></u>	City-ST-ZIP	 			
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STREET ADDRESS			STREET ADDRESS	. ~		-	
CITY-ST-ZIP			CITY-ST-ZIP		w.		
			-		·		
TITLE			TITLE				
NAME			NAME		•	7	

NING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

NAME

STREET ADDRESS

STREET ADDRESS

CHY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-7(P

NAME

FRANCISCO A. ESPINOSA 2/13/02 (305)266-7577

Date

Daytime Phone #

^{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.