ALTERNATIVE INVESTMENTS, LLC  DO NOT WRITE IN THIS SPACE  2. Princetal Plots of Business 7005 Glen Eagle Avenue  Suite, Apr. F. etc.  S	DOCEMENT # L01000022008  1. Entity Name						FILED		
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Suite Apr. 4 etc.  Coy 4 State Miami Lakes, FL  USA  33014  USA  33014  USA  33014  S. Coefficiate of State Desired  For Required  Applications  Per Required  TOOS Gleen Eagle Avenue  Committee  TOO NOT WRITE  Name and Address of Current Registered Agent  Name Luis E: Gonzalez, Jr.  Suren Accress IP O. Bus Number is Not Acceptable)  TOOS Gleen Eagle Avenue  Committee Suite Desired  Took Miami Lakes  FL		DO N	IOT WRIT	re in this	SSPAC	E	TALL	AHASSEE FLOR	ATE AIDA
City & State Miami Lakes, FL  City & State Miami Lakes, FL  DO NOT WRITE IN THIS SPACE    Miami Lakes, FL   Miami Lakes, FL   South Country   20   20   20   20   20   20   20   2	70000 01 - 1					<del></del>	-		59 F4 . D. D.
Miami Lakes, FL  Jap 33014  USA  Jap 100-100-1000  Jap 100-1000  Jap 1000  J				Suite, Apt. #, etc.			10131 "	O NOT WRITE IN THIS SI	PACE
33014 USA 33014 Country USA 33014 Country USA 7. Name and Address of Current Registered Apent    Name   Nam	Miami Lakes, FL			Miami Lakes, FL			4. FEI Number 01-0564409		
DO NOT WRITE  DO NOT WRITE  IN THIS SPACE  Note Accessed to the purpose of changing its registered agent, or both, in the State of Florida.  The above named unity subplies and statement for the purpose of changing its registered affect or registered agent, or both, in the State of Florida.  SIGNATURE  Make Check Payable to Department of State  DUE BY MAY 1.  B. The above named unity subplies and statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  In the above named unity subplies and statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  In the above named unity subplies and statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  In the above named unity subplies and statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  In the above named unity subplies and statement for the purpose of changing its registered agent.  In the above named unity subplies and statement for the purpose of changing its registered agent.  In the above named unity subplies and statement for the purpose of changing its registered agent.  In the above named unity subplies and statement for the purpose of changing its registered agent.  In the above named unity subplies and statement for the purpose of changing its registered agent.  In the above named unity subplies and statement for the purpose of changing its registered agent.  In the above named unity subplies and statement for the statement agent in the information subplies with this filing does not qualify for the eventor in statement in second in the statement of the information in managing member of manager of the united statement.  In the above named unity subplies with this filing does not qualify for the eventor of second in the statement of the statement in the stateme						5. Certificate of Statu		5.00 Additional	
8. The above named entity subprice size statement for the purpose of changing its registered after or registered agent, or both, in the State of Florida.  SIGNATURE  SIGNATURE  SPINIAR BOOLOGE Registered agent or both, in the State of Florida.  10 (25 (u))  Make Check Payable to Department of State  DUE BY MAY 1:  9. MANAGING MEMBERS MANAGERS  III.  III.  SIGNATURE  UNIS E. GONZalez, Jr.  TODOS Glen Eagle Drive  CITY-51-2P  Miami I alkae FI 33014  III.  III.						Street Address 7005 Glen I	E. Gonzalez, Jr. (P.O. Box Number is Not  Eagle Avenue	Acceptable)	
SIGNATURE    Source   Specific   Source   Specific   Source   Specific   Source   Specific   Source   Specific   Specific	8. The above	e named entit	y subprits Wis statemer	at for the purpose of char	nging its registere	Miami L	_akes	FL State of Florida	Zip Code 33014
9. MANAGING MEMBERS/MANAGERS  THE MAY 17  WAS LUIS E. GONZAIGZ, Jr.  STREET ADDRESS  OTY-51-2P  THE MAY 1  THE		1	1	. •			os agent, or sour, in the	,	2
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INAME STREET ADDRESS SITY-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 similar liability company or the receiver or to stee empowered to execute this report as required by Chapter 608. Florida Statutes.  SIGNATURE:  SIGNATURE AND TYPET OF PRINTED NAME OF SIGNING MANAGING MEMBER MANAGER OR AUTHORIZED REPRESENTATIVE.	NAME STREET ADDRESS CHTY-ST-ZIP		•		NAME STREET	ar 🖟 .			
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## **TURNER** & ASSOCIATES

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS



Biscayne Building • 19 West Flagler Street • Suite 600 • Miami, Florida 33130 Phone: 305-377-0707 • Facsimile: 305-377-0787 • Internet: www.turnercpas.com

October 25, 2002

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re:

Alternative Investments, LLC

Document #L01000022008

Dear Sir/Madam:

In connection with the captioned corporation, enclosed is the Uniform Business Report together with our check in the amount of \$50.00.

The previous annual report was not received by this corporation. Thank you for your consideration in this matter. Should you have any questions, please contact me.

Very truly yours,

Luis E. Gonzales, Jr.

For the firm

LEG/lgl

Enclosures

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