


2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2003 8:00 am
Secretary of State
02-28-2003 90041 004 ****50.00

DOCUMENT # L01000022150

1. Entity Name
DI BATISTA, L.L.C.



DO NOT WRITE IN THIS SPACE

| | | | |
|--|--|---|--|
| 2. Principal Place of Business 2500 SOUTH PARK Rd Suite, Apt. #, etc. 2A-3 City & State Pembroke Park Zip 33009 | | 3. Mailing Address Same Suite, Apt. #, etc. Same City & State Zip Country | |
|--|--|---|--|

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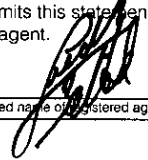
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|--|-------------------------------|
| 4. FEI Number 52-2364549 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required | |

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7. Name and Address of Current Registered Agent

| |
|---|
| Name LUCIANO Di BATTISTA |
| Street Address (P.O. Box Number is Not Acceptable) 2500 SOUTH PARK Rd # 2A-3 |
| City Pembroke Park |
| State FL |
| Zip Code 33009 |

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  LUCIANO F. Di BATTISTA President. 02-10-03

DATE

FEE IS \$50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

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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:  02-10-03

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

Date Daytime Phone #

CR2E083B (12/02)