

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90025 036 ****50.00

DOCUMENT # L01000022569
1. Entity Name
OCEAN NOBLE, LLC

938865

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1925 Brickell Ave
Suite, Apt. #, etc.
D 206
City & State
Miami FL
Zip
33129
Country
USA

3. Mailing Address
Suite, Apt. #, etc.
Same
City & State
Zip
Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
Applied For
Applied For
Applied For

5. Certificate of Status Desired \$5.00 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name
Roger Besu
Street Address (P.O. Box Number is Not Acceptable)
1925 Brickell Ave # D 206
City
Miami FL
Zip Code
33129

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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	Managing Member Vejar Cortes, Luis 1925 Brickell Ave. D206 Miami FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member Vejar Cortes, Hector Armando 1925 Brickell Ave. D206 Miami FL 33129
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CR2E083B (12/01)

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: Luis Veyar Cortes 4-8-02 305-854-6363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #