2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 90999 008 ****50.00

DOCUMENT # L02000000316

1. Entity Name
M.G.T. HOLDINGS L.C.

Principal Place of Business
338 MINORCA AVENUE
CORAL GABLES, FL 33134

Mailing Address
338 MINORCA AVENUE
CORAL GABLES, FL 33134

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

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

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number ✓ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

INTERNATIONAL REGISTERED AGENTS CORPORATIO
338 MINORCA AVENUE
CORAL GABLES, FL 33134

7. Name and Address of New Registered Agent

Name: Raul J. Sanchez de Varona
Street Address (P.O. Box Number is Not Acceptable)
1320 S. Dixie Hwy, St. 280
City: Coral Gables FL Zip Code: 33146

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: Signature, typed or printed name of registered agent (where applicable). (NOTE: Registered Agent signature required when combining) DATE: 4/23/03

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS

TITLE	MGR	☐ Delete
NAME	JESUS ALEJANDRO GUTIERREZ	
STREET ADDRESS	338 MINORCA AVENUE	
CITY-ST-ZIP	CORAL GABLES, FL 33134	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
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CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE	MGR	☒ Change ☐ Addition
NAME	Jesus Alejandro Gutierrez	
STREET ADDRESS	1320 S. Dixie Hwy, St. 280	
CITY-ST-ZIP	Coral Gables, FL. 33146	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E083 (10/02)

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: 4/23/03 305 6677733

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