

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

DOCUMENT # **0200003593**

1. Entity Name

BGT LLC
REINSTATEMENT

2003-
2004



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUN 17 PM 3:52 ¹²06/21/04

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

770 Cloughton Island Dr.

3. Mailing Address

Suite, Apt. #, etc.

PH30

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Zip

33131

Country

USA

Zip

Country

4. FEI Number

41-2040132

Applied For

Not Applicable

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

Luis Monaco

Street Address (P.O. Box Number is Not Acceptable)

770 Cloughton Island Dr. PH30

City

Miami

FL

Zip Code

33131

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

Luis Monaco
Signature, typed or printed name of registered agent and title if applicable

DATE

6/9/04

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
Luis Monaco
770 Cloughton Island Dr. PH30
Miami FL 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
REINSTATEMENT
2003-
2004

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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 606, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

Luis Monaco

6/9/04

CR2E083B (12/02)

2 of 2

June 9, 2004

Florida Department of State Division of Corporation
Attn: Mr. Lee Rivers
Uniform Business Report
P.O. Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN 17 PM 3:52


Re: BGT LLC
EIN 41-2040132
Document # L02000003593

Dear Mr. Rivers:

As per your phone conversation with my controller, Carolina Henao, I am enclosing the 2004 Uniform Business Report. The Uniform Business Report for 2003 was rejected, but we never received the rejection letter. Please be advised that your office received the annual fee for 2003 and 2004.

If you have any questions please contact Carolina at (305) 446-3177.

Thank you in advance,


Luis Monaco