2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000006242

Entity Name: LPF GROUP LTD. CO.

FEI Number: 75-3052984

FILED Feb 19, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8871 FONTAINEBLEAU BLVD. APT 507 8920 NW 8TH ST. MIAMI, FL 33172 501

MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

8871 FONTAINEBLEAU BLVD. APT 507 8920 NW 8TH ST.

MIAMI, FL 33172 MIAMI, FL 33172

> FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAGE, MABEL LAGE, MABEL

8871 FONTAINEBLEAU BLVD. APT 507 8920 NW 8TH ST. MIAMI, FL 33172 501 MIAMI, FL 33172

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: MABEL LAGE 02/19/2003

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

MGR (X) Delete () Change () Addition

FERNANDEZ, EDUARDO Name: Name: 8871 FONTAINEBLEAU BLVD. APT 507 Address: Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition ARTURO LAGE, JORGE Name: LAGE, JORGE A Name:

Address: 8871 FONTAINEBLEAU BLVD, APT 507 Address: 8920 NW 8TH ST. APT 501

City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172

Title: MGR () Delete Title: MGR (X) Change () Addition LAGE, MABEL LAGE, MABEL Name: Name:

8871 FONTAINEBLEAU BLVD. APT 507 8920 NW 8TH ST. APT 501 Address: Address:

City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: MARTHA PASCUAL, MIRIAM Name: PASCUAL, MIRIAM M 8871 FONTAINEBLEAU BLVD. APT 507 8920 NW 8TH ST. APT 507 Address: Address:

City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: MABEL LAGE 02/19/2003