LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)** DOCUMÉNT # L02000008216 1. Entity Name FILED KENSDALE SERVICES LLC. 2003 AUG -8 PM 2:23 DUNLION OF CORPORATIONS ALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business Mailing Address 7010-NE-10 Court . O. Box 960696 Suite, Apt. #, etc uite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State MIAMI City & State 4, FEI Number Applied For FLORIDA FLORIDA ΜΙΑΜΙ 14-3636578 Not Applicable Country 91. S.A Country U.S.A Zip \$5.00 Additional 5. Certificate of Status Desired 33138 33296 Fee Required 7. Name and Address of Current Registered Agent Name CIA **DO NOT WRITE** O. Box Number is Not Acceptable) IN THIS SPACE 12600-SW-151 At#122 Zip Code 33186 IAM I 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. HANTAL ACACIA FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1 9. CR2E083B (12/02) TITLE TITLE BEAUVOIR NAME NAME 7515- SW 152 and Que # A205 STREET ADDRESS STREET ADDRESS HIAHI, FLORIDA 33193 CITY-ST-ZIP CITY-ST-ZIP CHANTAL ÁCACIA 12600- 5W-151 AL #122 TITLE TITLE 200022180793 NAME NAME STREET ADDRESS STREET ADDRESS 03/03/03--01087--001 **55.00 CITY-ST-ZIP MIAMI, FL. 33186 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS **DO NOT WRITE** CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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. <u> 305-613-0805</u> SIGNATURE