

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2003 8:00 am
Secretary of State

05-20-2003 90027 001 ****50.00

DOCUMENT # L02000009201

1. Entity Name

VESSELNET LLC



Principal Place of Business

**28 PORFYRA, GROUND FLOOR
VOULA (ATHENS) 16673
GREECE**

Mailing Address

**28 PORFYRA, GROUND FLOOR
VOULA (ATHENS) 16673
GREECE**

10105419



2. Principal Place of Business

3. Mailing Address

22 Porfyra, Greece

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Voila (Athens) 16673

City & State

Voila (Athens) 16673

Zip

Country

Greece

Zip

Country

Greece

☐ 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

7. Name and Address of New Registered Agent

**BROWN, MORTON
19355 TURNBERRY WAY, TOWNHOUSE 8
AVENTURA FL 33180**

Name

Jeffrey M. Brown

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

19355 Turnberry Way, Townhouse 8

Aventura, Florida

City

Aventura

FL

Zip Code

33180

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

Jeffrey M. Brown
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

May 5, 2003

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

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE **MB RM**
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE **MB RM**
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

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

May 5, 2003

Date

305-490-4055

Daytime Phone #

CR2E083 (10/02)

PLEASE be advised that prior to the ~~#10200009201~~
May 1, 2003 deadline, I filed the UBR
on-line under document or tracking number

600017793096 AND submitted payment. However,
to date, I have received NO confirmation that
the form was properly processed.

I am therefore submitting this copy with a
second payment. By the time you receive this,
it is possible that the Internet version will have
been processed. If that occurs, please do not
charge me a second time. I can be emailed
at JBROWN@VSLNET.COM.

Finally, as I did receive confirmation that my
original form was received on-time (but it
was still not processed) I believe I should not
be charged any late fees.

Thank you,

Jeffrey Mark Brown