

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

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90307 014 *****50.00

DOCUMENT # L02000010732

1. Entity Name

Global Property Group, L.L.C.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1101 Brickell Ave

3. Mailing Address

2199 Ponce de Leon Blvd

Suite, Apt. #, etc.

1401

Suite, Apt. #, etc.

301

DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Coral Gables, FL

4. FEI Number

04-3689323

Applied For

Not Applicable

Zip

33134

Country

Zip

33134

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Kenneth F. Claussen

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

2199 Ponce de Leon Blvd, Suite 301

City Coral Gables

FL

Zip Code
33134

**DO NOT WRITE
IN THIS SPACE**

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 and title if applicable.

DATE

FEE IS \$50.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Managing Member
John R. LaCapra
1526 Breakwater Terrace, Hollywood, FL
33019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Managing Member
Juan I. Sosa
1101 Brickell Ave, Suite 1401, Miami, FL 33131

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

Authorized Representative

Date

Daytime Phone #

CR2E083B (12/02)