FILED
May 01, 2003 8:00 am
Secretary of State
05-01-2003 90274 041 ****50.00

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000010752

1. Entity Name
LAFATA GROUP, LLC

Principal Place of Business	Mailing Address
11260 SW 95 ST. MIAMI, FL 33176	11260 SW 95 ST. MIAMI, FL 33176

2. Principal Place of Business	3. Mailing Address
13186 S.W. 130 TERRACE	8404 S.W. 40 STREET
Suite, Apt. #, etc.	Suite, Apt. #, etc. MIAMI, FL
City & State MIAMI, FL	City & State MIAMI, FL
Zip 33186 Country USA	Zip 33155 Country USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 55-0808527 ☐ 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
BATTAH, BASSIL E 11260 SW 95 ST. MIAMI, FL 33176	Name: DAGOBERTO VALDES Street Address (P.O. Box Number is Not Acceptable): 8404 S.W. 40 STREET City: MIAMI FL Zip Code: 33155

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] DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	MGR BATTAH, HILDA 11260 SW 95 ST. MIAMI, FL 33176	☒ Delete	MGR ANTONIO LAFATA 11260 S.W. 95 STREET MIAMI, FL 33176	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BATTAH, BASSIL E 11260 SW 95 ST. MIAMI, FL 33176	☒ Delete	MGR TRINA C. BATTAH 11260 S.W. 95 STREET MIAMI, FL 33176	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	MGR BASSIL T. BATTAH 11260 SW 95 ST MIAMI, FL. 33176.	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

CR2E063 (10/02)

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] HILDA BATTAH 04/01/03 305-255-0700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #