

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 13, 2003 8:00 am
Secretary of State

04-16-2003 90033 011 ****50.00

DOCUMENT # L02000011965



1. Entity Name

FENI STAINLESS, LLC

Principal Place of Business

3110 SANDAL WOOD LANE
TITUSVILLE FL 32780

Mailing Address

3110 SANDAL WOOD LANE
TITUSVILLE FL 32780

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

01-0695275

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

ALDANA, MANUEL
3110 SANDAL WOOD LANE
TITUSVILLE FL 32780

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE	PRES.	☐ Delete
NAME	MANUEL F. ALDANA	
STREET ADDRESS	3110 SANDAL WOOD LANE	
CITY-ST-ZIP	TITUSVILLE, FL 32780	
TITLE	MEMBER	☐ Delete
NAME	RICARDO MUJSTER	
STREET ADDRESS	88-10 32ND AVE, UNIT #402	
CITY-ST-ZIP	EAST ELMHURST, NY 11369	
TITLE	MEMBER	☐ Delete
NAME	TELMA WATSON	
STREET ADDRESS	57 WEST ORCHARD RD.	
CITY-ST-ZIP	CHAPPAQUA, NY 10514	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE	PRES. - MGR	☐ Change ☐ Addition
NAME	MANUEL F. ALDANA	
STREET ADDRESS	3110 SANDAL WOOD LANE	
CITY-ST-ZIP	TITUSVILLE, FL 32780	
TITLE	MEMBER/DIRECTOR N.P.	☐ Change ☐ Addition
NAME	RICARDO MUJSTER	
STREET ADDRESS	88-10 32ND AVE, UNIT #402	
CITY-ST-ZIP	EAST ELMHURST, NY 11369	
TITLE	MEMBER/DIRECTOR	☐ Change ☐ Addition
NAME	TELMA WATSON	
STREET ADDRESS	57 WEST ORCHARD RD.	
CITY-ST-ZIP	CHAPPAQUA, NY 10514	
TITLE	MEMBER/DIRECTOR	☐ Change ☒ Addition
NAME	L. LYAM ALDANA	
STREET ADDRESS	79-58-68-13 AVE	
CITY-ST-ZIP	MIDDLE VILLAGE, NY 11379	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE:

SIGNATURE REQUIRED

MANUEL F. ALDANA

4-14-03 383-9160

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

Date

Daytime Phone #

CR2E083 (10/02)