

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

03-31-2003 90808 037 ****50.00

DOCUMENT # L02000017204	
1. Entity Name LATIN AMERICAN MORTGAGE, L.L.C.	

Principal Place of Business 13524 ROSEWOOD LANE NAPLES FL 33999	Mailing Address PO BOX 110448 NAPLES FL 34108
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55026061



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business 10641 Airport Rd. N.	3. Mailing Address PO Box 110448
Suite, Apt. #, etc. Suite 29	Suite, Apt. #, etc.
City & State NAPLES, FL.	City & State NAPLES, FL
Zip 34109	Country U.S.A
Zip 34108	Country USA

4. FEI Number 14-1848768	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent FEINSTEIN, MARK D 290 NORTH WEST 165TH STREET PENTHOUSE 4 MIAMI FL 33169
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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 Mark Feinstein MARK FEINSTEIN 3-27-03 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
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FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP MBR, President Eric Feinstein 10641 Airport Rd. N. NAPLES FL 34109 Ste 29	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP Vice Pres, Sec/Treas. Kathy Feinstein 10641 Airport Rd. N. Ste 29 Naples, FL 34109	☐ 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

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP MBR President Eric Feinstein 10641 Airport Rd N. Ste 29 NAPLES, FL 34109	☐ 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
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: Mark Feinstein 3-27-03 (239) 546-3440 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #
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CR2E083 (10/02)