

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

9/22/2003-90104-047-\$55.00-\$55.00

0052876

DOCUMENT # L02000017348

1. Entity Name

M.C. ENTERPRISES, L.L.C.



FILED

03 OCT 21 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

4835 EAST 10TH COURT  
HIALEAH FL 33013

Mailing Address

4835 EAST 10TH COURT  
HIALEAH FL 33013

2. Principal Place of Business

3. Mailing Address

12360 SW 122 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 103

City & State

City & State

MIAMI, FL

Zip

Country

Zip

Country

33186

4. FEI Number

01-0686839

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

7. Name and Address of New Registered Agent

ORTIZ, RICO

8308 N.W. 142ND STREET  
MIAMI FL 33016

Name

RICO ORTIZ

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

12360 SW 122 ST

SUITE 113

City

MIAMI

FL

Zip Code  
33186

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 UBR if applicable.

(NOTE: Registered Agent signature required when reinstating)

9.20.03

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MANAGER MEMBER  
MARVIN CARLOS  
4835 E. 10 CT.  
HIALEAH, FL. 33013

☐ 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MANAGER  
FEDERICO ORTIZ  
12360 SW 122 ST.  
MIAMI, FL. 33186

☐ 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:

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

9/20/03

Date

Daytime Phone #

CR2E083 (10/02)