# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

3/1

**FILED**
**Apr 15, 2003 8:00 am**
**Secretary of State**
03-10-2003 90028 032 ****50.00

DOCUMENT # L02000018178

1. Entity Name
E.Y.A. INTERNATIONAL GROUP, L.L.C.

| Principal Place of Business | Mailing Address |
|---|---|
| 3300 N.E. 191 STREET<br>AVENTURA, #1114<br>MIAMI FL 33180 | 3300 N.E. 191 STREET<br>AVENTURA, #1114<br>MIAMI FL 33180 |

☐ CHECK HERE IF MAKING CHANGES

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 5608 NW 161 ST | 5608 NW 161 ST |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: MIAMI LAKES | City & State: MIAMI LAKES |
| Zip: 33014 Country: USA | Zip: 33014 Country: USA |

4. FEI Number: 13-4204179 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

**6. Name and Address of Current Registered Agent**

KALSRTIEN, ENRIQUE B
3300 N.E. 191 STREET
AVENTURA, #1114
MIAMI FL 33180

**7. Name and Address of New Registered Agent**

Name: BIBLOVICH, ENRIQUE
Street Address (P.O. Box Number is Not Acceptable): 3300 N.E. 191 St. #1114
City: AVENTURA FL Zip Code: 33180

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] ENRIQUE BIBLOVICH 2/10/03
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 | | | 10. ADDITIONS / CHANGES | | |
|---|---|---|---|---|---|
| TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP | P<br>BIBLOVICH, ENRIQUE<br>3300 N.E. 191 St. #1114<br>AVENTURA, Fl. 33180 | ☐ Delete | TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP | V<br>BIBLOVICH, YURI<br>3300 N.E. 191 St. #1114<br>AVENTURA Fl. 33180 | ☐ Delete | TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP | S<br>BIBLOVICH, ALEJANDRA<br>3300 N.E. 191 St. #1114<br>AVENTURA, Fl. 33180 | ☐ Delete | TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP | | ☐ Delete | TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP | | ☐ Change ☐ Addition |
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CR2E083 (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] ALEJANDRA BIBLOVICH 2/10/03 (306) 627-0890
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #