

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2003 8:00 am
Secretary of State

06-05-2003 90005 027 ****50.00

DOCUMENT # L02000019083

1. Entity Name
ORTIZ FAMILY LLC



Principal Place of Business
**575 STONEMOUNT DRIVE
WESTON, FL 33326**

Mailing Address
**575 STONEMOUNT DRIVE
WESTON, FL 33326**

2. Principal Place of Business

575 Stonemont Dr.
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Weston FL

City & State

Zip
33326

Country

U.S.A

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
16-1638978

Applied For
Not Applied

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ORTIZ, DAVID
2600 WESTON RD.
STE. 105
WESTON, FL 33331**

7. Name and Address of New Registered Agent

Name **Ortiz, David**

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

City **Weston**

FL

Zip Code
33326

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when amending)

5-3-03

DATE

**FILE NOW WITH 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-STATE-ZIP
**Managing Member
David Ortiz
575 Stonemont Dr.
Weston, FL 33326** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Add

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

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CITY-STATE-ZIP ☐ Change ☐ Add

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CITY-STATE-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Add

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]

5-3-03

Attachment

Ortiz Family L.L.C.
575 Stonemont Dr.
Weston, FL 33326
(954) 385-8851

June 3, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

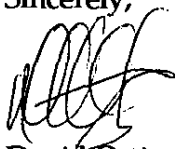
Re: Document #L02000019083

Dear Sir or Madam:

We are enclosing a Uniform Business Report for 2003 along with a check in the amount of \$50. Our new accountant brought to our attention that we should have received and filed this UBR by May 1, 2003. Unfortunately we moved and did not receive said report and our previous accountant did not advise us properly. Please accept our apologies for the confusion and our request to waive the penalties involved. Should you have any questions, please do not hesitate to contact us.

Thank you in advance for your anticipated cooperation in this matter.

Sincerely,



David Ortiz
Managing Member

DO/gmo

Enclosures