

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 17, 2003 8:00 am**  
**Secretary of State**

03-17-2003 90003 023 \*\*\*\*50.00

**DOCUMENT # L02000019246**



1. Entity Name  
**SOHO, LLC**

Principal Place of Business  
**4380 N BAY ROAD  
MIAMI BEACH FL 33140  
US**

Mailing Address  
**4380 N BAY ROAD  
MIAMI BEACH FL 33140  
US**

2. Principal Place of Business  
**2136 NW 1st AVE**  
Suite, Apt. #, etc.

3. Mailing Address  
**PO Box 2223**  
Suite, Apt. #, etc.

City & State  
**MIAMI, FL**

City & State  
**MIAMI BEACH, FL**

4. FEI Number

Applied For

Not Applicable

Zip  
**33130**

Country  
**U.S.A.**

Zip  
**33140**

Country  
**U.S.A.**

5. Certificate of Status Desired

**\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**LEVY, STEVEN Z  
2525 N STATE RD 7  
115  
HOLLYWOOD FL 33021**

7. Name and Address of New Registered Agent

Name **BERNARDO MOTOLA Esq.**  
Street Address (P.O. Box Number is Not Acceptable)  
**LUSKY & Motola, P.A.  
301 ALMERIA AVENUE, SUITE 345**  
City **CORAL GABLES** FL Zip Code **33134**

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

**B. Motola**

**3/12/03**

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
MGRM	BARROUKH, YVES	4380 N BAY ROAD	MIAMI BEACH FL 33140	<input type="checkbox"/>
MGRM	GREEN, ADRIAN	4380 N BAY ROAD	MIAMI BEACH FL 33140	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
MGRM	BARROUKH, YVES	5696 ALTON ROAD	MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/>	<input type="checkbox"/>
MGRM	GREEN ADRIAN	3120 PINE TREE DRIVE	MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 GREEN**

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

Date

Daytime Phone #

CR2E083 (10/02)