FILED

| UNIFORM BUSINESS REPORT (UBR) | | | | Jan 29, 2003 8:00 am | | | | |
|--|--------------------------------------|---|--|----------------------|-------------------------------------|--------------------------|---------------|--|
| DOCUMENT # L02000019451 1. Entity Name H.R.G. DECO, LLC | | | | | Secretary 01-29-2003 900: | , | | |
| n.n.d. DEGO, LLG | | | | | | | | |
| Principal Place of Business | Mailing Address | , | | | ພູບບູ | <u> </u> | | |
| B380 SW 102 STREET Miami FL 33156 | 8380 SW 102 STREET MIAMI FL 33156 | | | | | | | |
| O District Plans (D. State | | | | | | | | |
| 2. Principal Place of Business 1864 S. W. 106 AVENUE 7864 S. W. 1 | | 106 AVE | > | • | <i>)</i> | | | |
| Suite, Apt. #, etc. MIAMI - FLORIDA | Suite, Apt. #, etc. | | | | CHECK HERE IF MA | | | |
| City & State | City & State MIDMI - FO | A 33/7 | 3 | FEI Number | 063562 | - AI | ot Applicable | |
| 33173 Country | ^{Zip} 33/23 | DAO6_ | | 5. Certificate of | أكأان غيرية حا بالبرجانية فللمنتقطب | \$5.00 Ad Fee Require | | |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent Name | | | | | |
| VARELA, MANUEL JR 8380 SW 102 STREET | | Street A | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| MIAMI FL 33156 | | | 869 | L S.W | 106AVED | /00 | | |
| | | City / | niai | 7/ | | FL Zy Cy | 1e 73 | |
| The above named entity submits this statement the obligations of registered agent. | t for the purpose of manging its r | | registere | ed agent, or both, | | | I | |
| SIGNATURE SECRETIE VAR | RELA C | auf | | | INT 1-20 | 200 | 3 | |
| Signature, typed or printed name of registered ag | | Registered Agent signal | | when reinstating) | | DATE | | |
| | Make Check Payable | | partmen | it of State | | | | |
| 9. MANAGING MEN | Due BERS/MANAGERS | By May 1, 200 | 3 | | ADDITIONS/CHAI | NCES | | |
| TITLE | Delete | TITLE | Par | SIDENT | | ☐ Change | Addition | |
| NAME STREET ADDRESS | | NAME STREET ADDRESS | 551 | RESTIE | , VARELA | • | } | |
| CITY-ST-ZIP | | CITY-ST-ZIP | 78 | 54 SW | , V ME/A 106 TH A FL, 33173 | 15. | | |
| TITLE NAME | ☐ Delete | TITLE NAME | A | MIBMI - | 12, 33/73 | . Change | ☐ Addition { | |
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| CITY-ST-ZIP | | CITY-ST-ZIP | 1 | | | | Ì | |

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Floida 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.