

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90013 033 *****55.00

0018128

DOCUMENT # L02000021669

1. Entity Name

SILVER WINGS DEVELOPMENT LLC



Principal Place of Business

7550 SOUTHWEST 57TH AVE. STE 203
SOUTH MIAMI FL 33143

Mailing Address

7550 SOUTHWEST 57TH AVE. STE 203
SOUTH MIAMI FL 33143

2. Principal Place of Business

13071 MAR ST.

Suite, Apt. #, etc.

3. Mailing Address

13071 MAR ST.

Suite, Apt. #, etc.

City & State

CORAL GABLES, FL

Zip 33156
Country USA

City & State

CORAL GABLES, FL

Zip 33156
Country USA

4. FEI Number

27-0027473

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

MCCORMICK, ARTHUR F ESQ.
7550 SOUTHWEST 57TH AVE. STE 203
SOUTH MIAMI FL 33143

7. Name and Address of New Registered Agent

Name

JOSE RAFAEL MONTALVO

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

13071 MAR ST.

City

CORAL GABLES

FL

Zip Code

33156

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

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

MGRM &
PRESIDENT JOSE RAFAEL MONTALVO 4/8/03
(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

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 ☐ Change ☒ Addition
MGRM
JOSE RAFAEL MONTALVO
13071 MAR ST.
CORAL GABLES, FL 33156

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
MGRM
CORINA M. MONTALVO
13071 MAR ST.
CORAL GABLES, FL 33156

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:

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

JOSE RAFAEL MONTALVO 4/8/03 305 665 2616
Date Daytime Phone #

CR2E083 (10/02)