

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90007 039 ****50.00

DOCUMENT # L02000023320

1. Entity Name

FORTUNE BUILDERS, LLC



Principal Place of Business

HUGO E. DORTA, P.A.
801 BRICKELL AVENUE, STE. 905
MIAMI FL 33131

Mailing Address

HUGO E. DORTA, P.A.
801 BRICKELL AVENUE, STE. 905
MIAMI FL 33131

2. Principal Place of Business

14505 Commerce Way
Suite, Apt. #, etc.
Suite 750

City & State
Miami Lakes, FL

Zip
33016

Country
Dade

3. Mailing Address

14505 Commerce Way
Suite, Apt. #, etc.
Suite 750

City & State
Miami Lakes, FL

Zip
33016

Country
Dade



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DORTA, HUGO E PA
801 BRICKELL AVENUE, STE. 905
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name
Michael J. McGee, CPA, PA

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

14505 Commerce Way

Suite 750

City
Miami Lakes

FL

Zip Code
33016

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]

Michael J. McGee, CPA, PA

2/4/03

Signature, type, 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
CAIF, HECTOR RICARDO
801 BRICKELL AVE, STE. 905
MIAMI FL 33131

☐ 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
MGRM
CAIF, Hector Ricardo
14505 Commerce Way #750
Miami Lakes, FL 33016

☒ 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

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: X **SGO** **REQUIRED**

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

Date

Daytime Phone #

CR2E083 (10/02)