## **2003 LIMITED LIABILITY COMPANY** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L02000027416

1. Entity Name

MISSURA, L.L.C.

Principal Place of Rusiness



## **FILED** Apr 17, 2003 8:00 am Secretary of State 04-17-2003 90030 032 \*\*\*\*50.00

Principal Plac	ce of Business	Mailing Address	Mailing Address								
9130 SOUTH DADELAND BLVD SUITE #1504 MIAMI FL 33156		9130 SOUTH DADELAND BLVD SUITE #1504 MIAMI FL 33156									
		•			ŀ	F 10 0 H 0	HE DER CORE RECE	<b></b>	 	   <b>  181</b>     <b>  180</b>     18	CRO ALIM IRRA
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State		City & State		4.					pplied For		
Zip	Country	Zip Coun		ntry	5.		te of Status D			5.00 Ad ee Require	ditional
	6. Name and Address of Current	Registered Agent	<u> </u>		7.	Name ar	nd Address o	f New Reg	istered Ag	gent	
Guzman, Mario I 9130 South Dadeland Blvd., Suite #1504 Miami Fl 33156				Name GUZNAN MARIO Street Address (P.O. Box Number is Not Acceptable) 9/30 5. 2446 (AN) 3(1) Suins # 1504							
				City	4				FL	Zip Cod	e
8. The above the obligate SIGNATURE	named entity submits this statement for tions of registered agent.			ed office or ré	egistered a		oth, in the Sta	ate of Florid	a. I am fai	nillar with,	and accept
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTI	E: Registere	d Agent signature	required when	reinstating)			DATE		
		Make Check Payabl	le to Fid	FEE IS \$50 orida Depa ay 1, 2003		f State					[
9.	MANAGING MEMBER	RS/MANAGERS	10.		·	L	ADD	ITIONS/CI	HANGES		
TITLE	MGRM	☐ Delete	TITLE							Change	Addition
NAME	MONIS, ALEJANDRO H		NAM	E				•	•		
STREET ADDRESS	ARCOS 1641, FLOOR 7		STRE	ET ADDRESS							
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA		CITY	-ST-ZIP							
TITLE	MGRM	☐ Delete	TITLE					-	]	☐ Change	☐ Addition
NAME	MANIS, SERGIO E		NAM	E							
STREET ADDRESS	TACUARI 163, FLOOR 5			ET ADDRESS							1
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA		CITY	ST-ZIP		- Percent	100 ab	. ۱۳۰۰ و تکاف			
TITLE	MGRM	☐ Delete	TITLE							Change	☐ Addition
NAME	HUBSCHER DE MELMAN , EDIT :	S	NAM	Ε [							ļ
STREET ADDRESS	ECHEVERRIA 2015, FLOOR 5			ET ADDRESS							ł
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA		CITY-	-ST-ZIP							
TITLE	MGRM	☐ Delete	TITLE						[	Change	☐ Addition
NAME	GAWIANSKI DE MONIS , ADRIAN	ΑE	NAME	i							
STREET ADDRESS	O'HIGGINS 1826, FLOOR 6			ET ADDRESS							
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA		CITY-	·ST-ZIP							
TITLE	MGRM	☐ Delete	TITLE							] Change	☐ Addition
NAME OTRECT ADDRESS	GAWIANSKI, MARIA L	ND 0	NAME								
STREET ADDRESS CITY-ST-ZIP	FEDERICO LACROZE 1968, FLOC	)H 9		ET ADDRESS							İ
	BUENOS AIRES, ARGENTINA			-ST-ZIP							
TITLE	MGRM	☐ Delete	TITLE			•				] Change	Addition
NAME	MANIS DE JUSTITZ, ELIDA C		NAME	1							
STREET ADDRESS   CITY-ST-ZIP	51-08111 STREET			ET ADDRESS		•					}
44 11	CORONA NY 11368		CITY-	ST-ZIP							

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 AND TYPED OR PRINTED NAME OF SIGNING

Daytime Phone #