2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

4/24

FILED
May 12, 2003 8:00 am
Secretary of State

04-24-2003 90038 017 ****55.00

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DOCUMENT # L02000028211

1. Entity Name
RUIZ-ANGELO REAL ESTATE, LLC

Principal Place of Business	Mailing Address
4 Beverly Hills Blvd Beverly Hills Florida, 34465	(same)

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
4 Beverly Hills Blvd	(same)
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Beverly Hills, Fl	City & State
Zip: 34465 / Country	Zip / Country

4. FEI Number: 48-1294551 — Applied For / Not Applicable

5. Certificate of Status Desired ☒ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

EMILY RUIZ ANGELO
4 Beverly Hills Blvd.
Beverly Hills
Florida 34465

7. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable): 4 Beverly Hills Blvd
City: Beverly Hills FL Zip Code: 34465

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: Emily Ruiz-Angelo — DATE: 04/22/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PRESIDENT EMILY RUIZ-ANGELO 4 BEVERLY HILLS BLVD BEVERLY HILLS FL 34465 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE-PRES. JOAQUIN C. ANGELO 4 BEVERLY HILLS BLVD BEVERLY HILLS, FL 34465 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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: Joaquin C. Angelo — 4/23/03 — (352) 527-1888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #