

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 17, 2003 8:00 am**  
**Secretary of State**

01-17-2003 90218 027 \*\*\*\*50.00

**DOCUMENT # L02000028470**

1. Entity Name

**ONE WORLD, L.L.C.**



Principal Place of Business

Mailing Address

**2066 N.E. 155 STREET  
NORTH MIAMI FL 33162**

**2066 N.E. 155 STREET  
NORTH MIAMI FL 33162**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

**42-1556451**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**PONIEMAN, GABRIEL  
2066 N.E. 155 STREET  
NORTH MIAMI FL 33162**

7. Name and Address of New Registered Agent

Name **PONIEMAN, FERNANDO G.**

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

**2066 NE 155 STREET**

City **NORTH MIAMI BEACH FL** Zip Code **33162**

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 **FERNANDO G. PONIEMAN MGRM**

**1/10/03**

Signature, typed 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

10. ADDITIONS/CHANGES

TITLE **MGRM** ☐ Delete  
NAME **TORRES, ERNESTO MARTIN**  
STREET ADDRESS **2066 N.E. 155 STREET**  
CITY-ST-ZIP **NORTH MIAMI FL 33162**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **MGRM** ☐ Delete  
NAME **PONIEMAN, FERNANDO GABRIEL**  
STREET ADDRESS **2066 N.E. 155 STREET**  
CITY-ST-ZIP **NORTH MIAMI FL 33162**

TITLE **MGRM** ☒ Change ☐ Addition  
NAME **PONIEMAN, FERNANDO GABRIEL**  
STREET ADDRESS **2066, NE 155 ST. N. MIAMI BEACH (33162)**  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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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:

**FERNANDO G. PONIEMAN**

**1/10/03 (305) 940 7728**

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

Date

Daytime Phone #

CR2E083 (10/02)