

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000028979

1. Entity Name
GPR TRADING CO., LLC



Principal Place of Business
20291 NE 30TH AVE. #105
MIAMI, FL 33180

Mailing Address
20291 NE 30TH AVE. #105
MIAMI, FL 33180

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REGISTERED AGENTS OF FLORIDA, LLC
100 S.E. 2ND ST., STE. 3500
MIAMI, FL 33131

Name
Registered Agents of Florida, LLC
Street Address (P.O. Box Number is Not Acceptable)
100 Southeast 2nd Street
Suite 2900
City
Miami FL Zip Code
33131

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

Charles J. Rennert

Charles J. Rennert, V.P.

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

000017858196
2/03--01006--021 **50.00

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
		M Wanasa Holdings, LLC 100 S.E. Second Street, Suite 2900 Miami, Florida 33131	☐ Change ☒ Addition
		MP Adolfo Sergio Rascovsky 20291 N.E. 30 Avenue, #105 Miami, Florida 33180	☐ Change ☒ Addition
		VP Alejandro Guelman 15050 N.W. 79th Court, Suite 200 Miami Lakes, Florida 33016	☐ Change ☒ Addition
			☐ Change ☐ Addition
			☐ Change ☐ Addition
			☐ 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)(f), 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 MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Alejandro Guelman

(305) 512-1179

Date

Daytime Phone #

FILED

03 MAY -2 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

CR2E083 (10/02)