2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000031363

CROMWELL HOUSE INVESTMENT, LLC



FILED May 02, 2003 8:00 am Secretary of State 05-02-2003 90078 027 ****50.00

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|---|---|--------------------------------------|--------------------------------------|--|-----------------------|---|-----------------|----------------|----------------|-----------|
| Principal Plac | e of Business | Mailing Address | Mailing Address | | | | | | | |
| ======================================= | | 2912 NW 108 AVE. MIAMI FL 33172 | | | | | | | | |
| 2. Principal Place of Business | | 3. Mailing Address | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | CHECK HERE IF MAKING CHANGES | | | | |
| City & State | | City & State | City & State | | | 4. FEI Number Applied For 16-165286 Not Applicate | | | | 7 |
| Zip Country | | Zip | Zip Country | | | ate of Status Desired | | \$5.00 Add | ditional | 1 |
| | 6. Name and Address of Curr | ent Registered Agent | ' | | 7. Name a | nd Address of New I | Registered A | gent | | 1 |
| v-# | TO CAPT MANO | :- ¥ | <u></u> | Name | | | | | | 1 |
| 2912 | so-sarti, mario NW 108 ave. Fl 33172 | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| PAHTAIN | 1111 55172 | | | City | | | | Zip Cod | le . | { |
| | | | | Oily . | | | FL | 2.5 000 | | |
| | named entity submits this statement ons of registered agent. Signature, typed or printed name of registered a | | | | red when reinstating) | T State of Th | DATE | | |] |
| | | Make Check Payab | | - | | | | | | |
| 9. | MANAGING ME | MBERS/MANAGERS | S/MANAGERS 10. | | | ADDITIONS/CHANGES | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR RUSSO-SARTI, MARIO 2912 NW 108 AVE. | ☐ Celete | TITLE NAME STREET CITY-S' | ADDRESS 46 | Pio Lu | 15 Russo 13eddoral Orioa 331 | cT. | Change | Addition | 00/01/000 |
| | MIAMI FL 33172 | | | | AMI FA | -DRIVA 331 | 18 | | | 18 |
| TITLE NAME STREET ADDRESS CITY-SY-ZIP | | ☐ Delete | TITLE NAME STREET CITY-S' | ADORESS | | | | ☐ Change | Addition | [|
| | | | | 7-211 | | <u>-</u> | | | Addition_ | - |
| NAME STREET ADDRESS CITY-ST-ZIP | | 1=1 - Delete | NAME | ADORESS T-ZIP | | | | | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET CITY-S' | ADDRESS | | | | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME | ADDRESS | | | | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | · Delete | TITLE NAME . STREET CITY-S' | ADDRESS 1- ZIP | | | | Change | Addition | 1 |
| | ertify that the information supplied | with this filing does not qualify fo | | | Section 119 070 | 3)(i). Florida Statutes | I further certi | fy that the in | nformation | 1 |
| | erang areas and amountainon oupplied | , and ming about not quality to | ·· uro onorth | | | ·//·/, i ioiisa otatutos. | | ., | | 1 |

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.