## LIMITED LIABILITY COMPANY · UNIFORM BUSINESS REPORT (UBR)

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

## FILED Mar 31, 2003 8:00 am Secretary of State 03-18-2003 90155 003 \*\*\*\*50.00

Daytime Phone #

DOCUMENT # L02000031445

1. Entity Name



EMERALD GROUP, LLC					ปปนผบบบบ				
	DO NOT WRITE	in This	SPAC	E	7 Y	,			
Principal Place of Business     1500 San Remo Avenue			3. Mailing Address 1500 San Remo Avenue						
Suite, Apt. #, etc. Suite 145		Suite, Apt. #, etc. Suite 145			DO	NOT WRITE IN THIS	SPACE		
City & State Coral Gables, FL		City & State Coral Gables	s, FL		4. FEI Number 45-0	498865		Applied For	]
Zip 33146	Zip Country		Country USA		5. Certificate of Status	Desired	\$5.00 / Fee Regi	Additional	
DO NOT WE					_7Name and Address	of Current Registere			
		RITE		<del></del>	s W. Jarvis				
	IN THIS SP	나이다는 그것 같은 이 기속하다.		Street Address (P.O. Box Number is Not Acceptable)					
				1500 San Remo, Suite 145					
			John Strain	City Coral G	ables	FL	Zip C - 331	ode 46	
	named entity submits this statement for ions of registered agent.  Signature, typed or printed name of registered agent.		ging its registere	d office or registe	red agent, or both, in the	State of Florida. I am	familiar wit	h, and accept	    -
		771.7.41	FEE IS Payable to Fid DUE BY	orida Departme	ent of State	. 500			
9.	MANAGING MEMBE	RS/MANAGERS	1.3.49 24.0×					5 (2 ) (3 ) (4 ) (4 ) (4 ) (4 ) (4 ) (4 ) (4	2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member Ma. De Los Angeles Santo 1500 San Remo, #145, Co		STREE	ET ADDRESS ST. ZIP					383B (12/02
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member Irma Concepcion Barba Va 1500 San Remo, #145, Co		NAME STREET	ET ADDRESS ST-71P					CR2E083B
TITLE  NAME STREET ADDRESS  CITY-ST-ZIP	Managing Member Carlos Ronald Vimo 1500 San Remo, #145, Co	ral Gables, FL 3	221 <i>16</i> 8 °	. 1 6	DO N	OT WRI	TE	-	
TITLE NAME STREET AODRESS CITY-ST-ZIP	Managing Member Alfonso Conrado Rey 1500 San Remo, #145, Co	ral Gables, FL 3	221/6	ET ADDRESS ST; ZIP	IN-TI-	IIS SPAC	CE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member Terrence N. Went 1500 San Remo, #145, Co	ral Gables, FL	つつイオム 昔ぶんかく	\$15.0 A					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			CITY	T ADDRESS ST-ZIP					
	certify that the information supplied with on this report is true and accurate and bility company or the receiver or trustee					Statutes. I further ce n a managing memb	rtify that th er or mana	e information ager of the	

3/18/2003-90155-003-\$50.00-\$50.00

LIMITED LIABILITY COMPANY

u	INIFORM BUSINE	SS REPORT	(U	3Ř)	•		
1. Emity Nar	IMENT # L02000031	445			Attac	bmest	
	DO NOT WRITE	IN THIS SI	PAC	Ε			
	Place of Business in Remo Avenue	3. Mailing Address 1500 San Remo	Avenue	)			
Suite Apt	. #. etc.	Suite, Apt. #, etc. Suite 145			DO NOT WRITE IN	THIS SPACE	
City & State Coral Gables, FL		City & State Coral Gables, FL		<u> </u>	4 FEI Number 45-0498865	Applied For Not Applicable	
Zip	Country	Zip 33146	Count	ry	5. Certificate of Status Desired	\$5.00 Additional	
33146	USA	33146	_US		7. Name and Address of Current Regis	Fee Required	
	میشود در از محمد کریده خواهندگان کنداند. مراد در است می در این کرایش	<u>ئىنىسىمىتىنىسى دەرىمىيىچ يور</u> <u>ئىنىسىمىتىنىسى</u>	Name Ja	Name James	nes W. Jarvis		
DO NOT WRITE IN THIS SPACE				. Street Address (P.O. Box Number is Not Acceptable)			
			Ī	1500 San Remo Avenue, Suite 145			
		Ī	City Coral Gables FL Zip Code 33146				
the obliga	e named entity submits this statement for tions of registered agent.  Signature, typed of printed name of registered agent a	nd title if appaceble.			ed agent, or both, in the State of Florida.	am familiar with, and accept	
		Make Check Payabl			nt of State		
9.	MANAGING MEMBE				<del></del>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member Ma. De Los Angeles Santo: 1500 San Remo, #145, Coi		TITLE NAME STREET CITY-S	ADDRESS		M38 112/m3	
(ITLE NAME STREET ADDRESS CITY-ST-ZIP	Member Irma Concepcion Barba Va 1500 San Remo,#145, Con		NAME NAME STREET CITY-S	ADORESS		n CRO	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member Carlos Ronald Vimo -1500 San Remo;#145;Cora	l Gabies;FL-33146	TITLE MAME STREET	ADDRESS	DO NOT WE	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member Alfonso Conrado Rey 1500 San Remo,#145,Cora	l Gables,FL 33146	TITLE	ADDRESS	IN THIS SPA		
TITLE NAME STREET ADDRESS CHY-SI-ZIP	Member Terrence N. Went 1500 San Remo,#145, Core	al Gables,FL33146	TITLE HAME STREET CITY-S	ADDRESS 1-ZIP			
ITILL NAME STREET ADDRESS			TITLE NAME STREET	Address			

11. I hereby certify that the information supplied with this filling 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 eath; 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.

CITY-ST-ZIP

SIGNATURE: MILES SIGNATURE AND TYPED OR PROPERTY NAME

CITY ST- ZIP

MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE