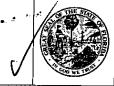
LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L02000032519

1. Entity Name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF



FILED Feb 28, 2003 8:00 am Secretary of State 02-28-2003 90041 005 ****50.00

ERT, L.C.			7	WE THE		
DC	NOT WRIT	E IN THIS S	SPAC	3E		
2. Principal Place of Business 1428 Brickell Avenue 3. Mailing Address 1428 Brickell						
Suite, Apt. #, etc.		1428 Brickell Avenue Suite, Apt. #, etc.		enue	DO NOT WRITE IN THIS SPACE)F
Suite 400 City & State		Suite 400	Suite 400 City & State			
City & State Miami, FL	33131				4. FEI Number	X Applied For Not Applicable
33131	Country USA	Zip 33131	Country USA		5. Certificate of Status Desired	00 Additional Required
					7. Name and Address of Current Registered Age	
	DO NOT V	VRITE -		Name Paul (Cummings	
	IN THIS S	and the first the delivery that were trade that the first of the first		Street Address (F	RC. Box Number is Not Acceptable)	
		FAUE		Suite	400	
				City Miami	FL Z	ip Code 33131
8. The above name the obligations of	d entity submits this statement registered agent.	for the purpose of changing i	its register		ed agent, or both, in the State of Florida. I am familian	with, and accept
	garante agom					
SIGNATURE	e, typed or printed name of registered ager	at and title if applicable.			DĂTE	
		Make Cheek Bare		\$50.00		
		Make Check Paya	DUE BY	有一种,但是这种的,但是是有一种的一种,但是是是一种的一种的一种的一种的一种的一种的一种的一种的一种的一种的一种的一种的一种的一	it or state	
9.	MANAGING MEMB	ERS/MANAGERS				
TITLE NAME	Manager		חונו	and the same of th		
STREET ADDRESS	Paul M. Cummin 1428 Brickell	ngs Avenue, Suite 4	NAM STRE	ET ADDRESS		
CITY-ST-ZIP	Miami, FL 331	.31	CITY	-ST-ZIP	ander se de la companya de la compa En la companya de la	
TITLE NAME	•		A TITLE			
STREET ADDRESS			NAM Stre	ET ADDRESS		
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TITLE NAME		· · · · · · · · · · · · · · · · · · ·	MILE			
STREET ADDRESS			NAMI STRE	E et adoress		
CITY-ST-ZIP	_			-ST-ZIP Committee of the committee of th	DO NOT WRITE	And the second second second
IITLE			TITLE			
NAME Street Address			NAME		IN THIS SPACE	
CITY-ST-ZIP			Santagoria.	ET ADDRESS ST-ZIP		
TITLE		· · · · · · · · · · · · · · · · · · ·	TITLE			
IAME			NAME			
TREET ADDRESS				ET ADDRESS ST-ZIP		
ITLE	<u> </u>		TITLE	ekintengenten (p. 1861/1914)		
AME			NAME	Petronica (Chica) Chican Chica (Chica)		
TREET ADDRESS				ET ADDRESS ST-ZIP		
I hereby certify the indicated on this limited liability co.	at the information supplied with report is true and accurate and mpany or the ecceiver or trusted	this filing does not qualify for that my signature shall have	r the exen the same	nption stated in Secti legal effect as if mad	ion 119.07(3)(i), Florida Statutes. I further certify that de under oath; that I am a managing member or ma	the information

MBER, MANAGER OF AUTHORIZED REPRESENTATIVE