

LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90039 028 \*\*\*\*50.00

DOCUMENT # **L03000012381**

1. Entity Name

PRASK GROUP LLC

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**250 SW 13th AVENUE**

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

**14002323**

DO NOT WRITE IN THIS SPACE

City & State  
**POMPANO BEACH, FL**

City & State

4. FEI Number  
**56-2339919**

Applied For  
Not Applicable

Zip  
**33069-3228**

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

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

City

**FL**

Zip Code

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00  
Make Check Payable to Department of State  
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MANAGING MEMBER  
ANTHONY PETRILLO  
250 SW 13th AVENUE  
POMPANO BEACH, FL 33069**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MANAGING MEMBER  
YU CHIH CHANG  
250 SW 13th AVENUE  
POMPANO BEACH, FL 33069**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MANAGING MEMBER  
EDWARD S. REPETTI  
250 SW 13th AVENUE  
POMPANO BEACH, FL 33069**

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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: *Charles R. Sped*

2/16/2005

9547842262

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

Date

Daytime Phone #

CR2E03B (12/02)