2001	UNIFORM	<b>BUSINESS</b>	REPORT	(UBR)
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DOCUMENT # L9400000329				FILED OI MAR -5 PM 3:				
INVERSIONES LAFUENTE, L.C.								
Original Place of Pusings				_	SECRETARY OF STATE			
Principal Place of Business Mailing Address					TALLAHASSEE, FLORIDA			
3191 NW 99TH AVE MIAMI FL 33172  MIAMI FL 33172  3191 NW 99TH AVE MIAMI FL 33172								
2. Principal F	Place of Business	3. Mailing Address	<del></del>	_}				
Suite, Apt. #, etc. Su		Suite, Apt. #, etc.	Suite Ant # etc		DO NOT WRITE IN THIS SPACE			
City & Stat	te	City & State		4. FEI Nur	mber 65-0507741	<del> </del>	pplied For ot Applicable	
Zip	Country	Zip	Country	5. Certific	ate of Status Desired	\$5.00 Ad Fee Require		
	6. Name and Address of Curren	t Registered Agent		7. Name a	and Address of New Registere	<u>-</u>		
·	<del> </del>		Name					
LAFUENTE, RAUL			Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL	' 99TH AVE . 33172	•						
			City	•	F	Zip Cod	te	
SIGNATURE	Signature, typed or printed name of registered agen	it and title if applicable. (NOTE	Registered Agent signature req	uired when reinstating)	DATI		<del></del>	
SIGNATURE	Signature, typed or printed name of registered agen	FILE NO	Registered Agent signature req DW!!! FEE IS \$50.0 yable to Departmen	00	DATI		<u>.                                    </u>	
	Signature, typed or printed name of registered agen	FILÉ NO Make Check Pa	OW!!! FEE IS \$50.0	00	ADDITIONS/CHANG	• •.	·	
9. Title Name Street address	MANAGING MEMI MGRM LAFUENTE, RAUL 3191 NW 99TH AVE.	FILÉ NO Make Check Pa	OW!!! FEE IS \$50.0 yable to Departmen	00		• •.	- Addition	
9. Title Name Street address City-St-Zip	MANAGING MEMI MGRM LAFUENTE, RAUL 3191 NW 99TH AVE. MIAMI FL 33172	FILE NO Make Check Par	OW!!! FEE IS \$50.0 yable to Departmen  10. TITLE NAME STREET ADDRESS	00		ES	Addition Addition	
9. TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEME MGRM LAFUENTE, RAUL 3191 NW 99TH AVE. MIAMI FL 33172 MGRM DE LAFUENTE, ANTONIA C 3191 NW 99TH AVE.	FILE NO Make Check Para BERS/MEMBERS	DW!!! FEE IS \$50.0 yable to Departmen  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	00 It of State	ADDITIONS/CHANG	ES Change	Addition	
9.  TITLE  NAME  STREET ADDRESS  GITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	MANAGING MEMI MGRM LAFUENTE, RAUL 3191 NW 99TH AVE. MIAMI FL 33172 MGRM DE LAFUENTE, ANTONIA C	FILE NO Make Check Para BERS/MEMBERS	DW!!! FEE IS \$50.0 yable to Departmen  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	00 It of State	ADDITIONS/CHANG	ES Change    Change	Addition	
9.  TITLE  NAME  STREET ADDRESS  GITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	MANAGING MEME MGRM LAFUENTE, RAUL 3191 NW 99TH AVE. MIAMI FL 33172 MGRM DE LAFUENTE, ANTONIA C 3191 NW 99TH AVE.	FILE NO Make Check Para BERS/MEMBERS Delete	DW!!! FEE IS \$50.0 yable to Department  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	00 It of State	ADDITIONS/CHANG 500003888 -03/20/01	ES Change    Change	Addition .	
9.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEME MGRM LAFUENTE, RAUL 3191 NW 99TH AVE. MIAMI FL 33172 MGRM DE LAFUENTE, ANTONIA C 3191 NW 99TH AVE.	FILE NO Make Check Para BERS/MEMBERS Delete	DW!!! FEE IS \$50.0  yable to Department  10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	00 It of State	ADDITIONS/CHANG 500003888 -03/20/01	ES Change    Change	Addition .	
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limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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

2/4/01 301-693-8502 Date Daytime Phone #