

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L96000000444

1. Entity Name
SWAN BUSINESS SYSTEMS, L.C.

FILED

00 JAN 28 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
8405 NW 53RD STREET, SUITE A100
MIAMI FL 33166

Mailing Address
8405 NW 53RD STREET, SUITE A100
MIAMI FL 33166-4511



2. Principal Place of Business
8405 N.W. 53 street

3. Mailing Address
8405 N.W. 53 street

Suite, Apt. #, etc.
C105

Suite, Apt. #, etc.
C105

City & State
Miami, FL

City & State
Miami, FL

Zip
33166

Country

Zip
33166

Country

4. FEI Number
65-0659854

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GUTIERREZ, ELIECER
8405 NW 53RD STREET, SUITE A100
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name
Gutiérrez, Eliecer

Street Address (P.O. Box Number is Not Acceptable)
8405 N.W. 53 street

City
C105

City
Miami

FL | Zip Code
33166

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.

SIGNATURE *Elicer Gutierrez*

(NOTE: Registered Agent signature required when reinstating)

DATE

01/24/2000

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR
NAVAS, HERMANN G
CENTRO EMPRESARIAL ROCA PH
AVENIDA ORINOCO LAS MERCEDES

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR
GUTIERREZ, ELIECER
5162 NW 114 COURT
MIAMI FL 33178

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR
GUARINO, GERARDO
AVENIDA ORINOCO, LAS MERCEDES
CARACAS VENEZUELA

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR
SORTINO, SEBASTIANO
CENTRO EMPRESARIAL ROCA PH
CARACAS VENEZUELA

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR
LA FEE, OSWALDO
4720 NORTHWEST 102 AVENUE APT 102
MIAMI FL 33178

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

10.

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ADDITIONS/CHANGES

☐ Change ☐ Addition

900003121139-5

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*****50.00 *****50.00

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☐ Change ☐ Addition

[Signature]

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

Elicer Gutierrez 01/24/2000 (305) 499 9622