

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 28, 2005 08:00 AM
Secretary of State

DOCUMENT # L97000000693

1. Entity Name
THE AMERICAN EXPORTS ENTERPRISE, L.C.



Principal Place of Business
**4100 NE 2ND AVENUE
SUITE 309
MIAMI, FL 33137**

Mailing Address
**4100 NE 2ND AVENUE
SUITE 309
MIAMI, FL 33137**



02252005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0770006

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**NATIONAL REGISTERED AGENTS, INC.
501 BRICKELL KEY DRIVE, SUITE 602
MIAMI, FL 33131**

**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

(NOTE: Registered Agent signature required when reconstituting)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
DE BEAUREPAIRE, THIERRY
355 N SHORE DR
MIAMI BEACH, FL 33140**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
DE BEAUREPAIRE, KAREEN
355 N. SHORE DR.
MIAMI BEACH, FL 33140**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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CITY - ST - ZIP

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CITY - ST - ZIP

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02/28/05-80088-002 55.00

**DO NOT WRITE
IN THIS SPACE**

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 AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

2/25/05 **305-576-4338**