

# 2001 UNIFORM BUSINESS REPORT (UBR)

0001023 AF

DOCUMENT # L98000001376

1. Entity Name  
BANANA FLIGHT CENTER, L.C.

Principal Place of Business

2360 COLLINS AVENUE  
MIAMI BEACH FL 33139

Mailing Address

2360 COLLINS AVENUE  
MIAMI BEACH FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

CORPORATE ACCESS, INC.  
236 EASWT 6TH AVE.  
TALLAHASSEE FL 32303

4. FEI Number

94-3307235

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE IN C WITH FEE IS \$50.00  
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

TITLE MGR ☐ Delete  
NAME ASATEJ SRL  
STREET ADDRESS FLORIDA 835, 3 PISO, OFFICE 320  
CITY-ST-ZIP BUENOS AIRES 1005, ARGENTINA

TITLE MGR ☒ Delete  
NAME BANANA BUNGALOW MANAGEMENT, INC.  
STREET ADDRESS 6711 FOREST LAWN DRIVE, SUITE 209  
CITY-ST-ZIP LOS ANGELES CA 90268

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Manager ☐ Change ☒ Addition  
NAME AL MUNDO.COM, INC  
STREET ADDRESS One Rodney Square - 10th Floor  
CITY-ST-ZIP Tenth & King St - Wilmington - Delaware 19801

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME 300004336653--0  
STREET ADDRESS -05/31/01--01088--004  
CITY-ST-ZIP \*\*\*\*\*50.00 \*\*\*\*\*50.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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, MANAGER, OR AUTHORIZED REPRESENTATIVE

April 11<sup>th</sup>, 2001

305-538-7773

Date

Daytime Phone #

CR2E083 (11/00)