

# 2001. UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000002366

1. Entity Name  
INTERNATIONAL INSTITUTE OF IMPLANTOLOGY LC

Principal Place of Business  
1221 BRICKELL AVENUE, SUITE 1100  
MIAMI FL 33131

Mailing Address  
1221 BRICKELL AVENUE, SUITE 1100  
MIAMI FL 33131

FILED

01 MAY 16 PM 2:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0870388

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AGARMUNT, LUIS  
1221 BRICKELL AVENUE, SUITE 1100  
MIAMI FL 33131

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
BECKERMEYER LIMITED  
1221 BRICKELL AVENUE, SUITE 1100  
MIAMI FL 33131 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
800004416448--3  
-06/12/01--01076--007 ☐ Change ☐ Addition

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

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 *MANAGER*

MANAGED BY BECKERMEYER LTD.

4-25-7001

305-373-5802

CR2E083 (11/00)

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