FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Mar 29, 2002 8:00 am Secretary of State DOCUMENT # 1_9800003188 1. Entity Name 03-29-2002 91213 006 ****50 00 INTERAMERICAN REALTY GROUP L.L.C. Principal Place of Business Mailing Address 2050 CORAL WAY 2050 CORAL WAY SUITE 305 SUITE 305 MIAMI FL 33145 **MIAMI FL 33145** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0883056 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JORGE <u>H. VELILLA</u> PATRICIA DE VELILLA Street Address (P.O. Box Number is Not Acceptable) 2050 CORAL WAY SUITE 305 **MIAMI FL 33145** City Zip Code 33145 MIAMI 8. The above named antity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. JORGE H. VELILLA - MER SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGR MGR TITLE 🗹 Delete TITLE Addition Change JORGE H. VELILLA NAME CORREA, LUIS F NAME 2050 SW 22-0 ST - SUITE 305 STREET ADDRESS 2050 CORAL WAY, STE. 305 STREET ADDRESS CITY-ST-ZIP MIAMI - FL 33145 **MIAMI FL 33145** CITY-ST-ZIP Delete MGR TITLE TITLE Addition Change NAME VELILLA, PATRICIA NAME STREET ADDRESS STREET ADDRESS 881 OCEAN DRIVE UNIT 13-E CITY-ST-ZIP **KEY BISCAYNE FL 33149** CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

JORGE H. VELILLA - MGR SIGNATURE: HE AND TYPES OPERIMITED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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 reserver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.