

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # LA9000001739
 1. Entity Name
 A.L.V. Services & Supplies, L.L.C.

Principal Place of Business Mailing Address
 3600 West 12TH AVE. 3600 West 12TH AVE.
 Hialeah, Florida 33012-4950 Hialeah, Florida 33012-4950

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED
Dec 03, 2001 8:00 A.M.
Secretary of State

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 Cuevas, Andrew ESQ.
 Cuevas & Rubin, P.A.
 9200 S. Dadeland Blvd., Suite 603
 Miami, FL 33156

4. FEI Number
 650907575 Applied For
 Not Applicable

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

7. Name and Address of New Registered Agent
 Name: Andrew Cuevas, Esq.
 Street Address (P.O. Box Number is Not Acceptable): Cuevas & Rubin, P.A.
 536 Biltmore Way
 City: Coral Gables FL Zip Code: 33134

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: *Andrew Cuevas*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE: _____

FILED IN COUNTY REGISTERED
 Check Payable to Department of State
 800004710958--4
 -12/06/01--01012--015
 *****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM William Castro 15864 SW 82nd St. Miami, FL 33193 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Jairo Lovera 15864 SW 82nd Ave. Miami, FL 33193 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(f), 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]* 11-28-01 305 387 1769
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (1/1/00)

No Penalty Required. etc

**A.L.V. Services &
Supplies, L.L.C.**

3600 West 12Th Ave.
Hialeah, Florida 330212

November 28, 2001

Division of Corporations
Registration Section
Ms. Diana Cushing
409 E. Gaines Street
Tallahassee, Florida 32399

VIA FEDEX

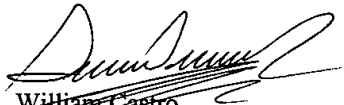
RE: A.L.V. Services & Supplies, L.L.C.

Dear Ms. Cushing:

This letter is to inform you that the company mentioned above never received the 2001 Uniform Business Report, therefore our company is now Inactive. Enclosed please find a check for the amount of \$50.00 and the 2001 Uniform Business Report to renew the company.

Thank you in advance for your prompt response.

Sincerely,



William Castro
MGRM
Encl.