

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2003 8:00 am
Secretary of State

03-18-2003 90151 026 ****50.00

DOCUMENT # L99000003126

1. Entity Name

QUIZ 740, L.C.



Principal Place of Business

**2748 CAPITAL CIRCLE N.E.
SUITE #108
TALLAHASSEE FL 32308**

Mailing Address

**1202 DEL MAR BLVD., STE. 6
LAREDO TX 78045**

2. Principal Place of Business

3. Mailing Address

1913 McPherson Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

105

City & State

City & State

Laredo, TX

Zip

Country

Zip

Country

78045

U.S.

4. FEI Number

74-2895915

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TRAUTMAN, CHRIS
2305 KILLEARN CENTER BLVD
A3
TALLAHASSEE FL 32309**

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. 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 reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
|--|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR TRAUTMANN, DELBERT A JR. 1202 DEL MAR BLVD., STE. 6 LAREDO TX 78045 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 1913 McPherson Ave., Ste. 105 Laredo, TX 78045 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <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)(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: *Delbert A. Trautman* **DELBERT A. TRAUTMAN** 3/13/03 956 717 2446

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

CR2E083 (10/02)