

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90244 043 ****50.00

DOCUMENT # L99000004305

1. Entity Name

NETCELL, L.L.C.

Principal Place of Business

4805 N.W. 79 AVE. #16
MIAMI FL 33166

Mailing Address

4805 N.W. 79 AVE. #16
MIAMI FL 33166

2. Principal Place of Business

3900 NW 79 AV

Suite, Apt. #, etc.

569

City & State
MIAMI - FL

Zip
33166

Country
USA

3. Mailing Address

3900 NW 79 AV

Suite, Apt. #, etc.

569

City & State
MIAMI - FL

Zip
33166

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0933635**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ARISTEIGUIETA, LUIS
4805 N.W. 79 AVE. #16
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name **LUIS ARISTEIGUIETA**

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

3900 NW 79 AV # 569

City **MIAMI - FL**

FL

Zip Code
33166

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
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
 NAME **ARISTEIGUIETA, LUIS**
 STREET ADDRESS **4805 N.W. 79 AVE. #16**
 CITY-ST-ZIP **MIAMI FL 33166**

TITLE **MGRM** ☒ Delete
 NAME **VIZARRAONDO, ALFREDO E**
 STREET ADDRESS **200 SE 15 ROAD #4-A**
 CITY-ST-ZIP **MIAMI FL 33129**

TITLE **MGRM** ☒ Delete
 NAME **MORANTES, RICARDO A**
 STREET ADDRESS **11058 NW 48TH LANE**
 CITY-ST-ZIP **MIAMI FL 33178**

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 **LUIS ARISTEIGUIETA** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **3900 NW 79 AV # 569**
 CITY-ST-ZIP **MIAMI - FL 33166**
USA

TITLE **MGRM** ☒ Change ☐ Addition
 NAME **RICARDO FREITAS**
 STREET ADDRESS **AV. PPA Los Palos grandes Edif. DON**
 CITY-ST-ZIP

TITLE **Pedro Piso 6B.** ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **CAYACAS, VENEZUELA.**
 CITY-ST-ZIP

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

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 REQUIRED

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

Date

Daytime Phone #

01/11/02 **305 468-9920**

CR2E083 (9/01)