

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000005978

1. Entity Name  
SYNTHESIS PEC LLC

FILED

00 FEB -4 AM 11:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
941 4TH STREET, STE #200M  
MIAMI BEACH FL 33139

Mailing Address  
941 4TH STREET, STE #200M  
MIAMI BEACH FL 33139-6816

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For  
☒ Not Applicable

Zip

Country

Zip

Country

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

CORPORATE CREATIONS ENTERPRISES INC  
941 FOURTH STREET #200  
MIAMI BEACH FL 33139

Name

Street Address (P.O. Box Numbers Not Acceptable)

400003128874--5

02/09/00 01016-021

\*\*\*\*\*50.00 \*\*\*\*\*50.00

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 MGR ☐ Delete  
NAME GREER-DONNELLY, JOHN T  
STREET ADDRESS 941 4TH STREET, #200M  
CITY-ST-ZIP MIAMI BEACH FL

TITLE ☒ Change ☐ Add  
NAME John Trevor Greer Donnelly  
STREET ADDRESS Rue du Moulin  
CITY-ST-ZIP Sark  
Channel Islands

TITLE MGR ☐ Delete  
NAME LOUISE CREBER, CHRISTIANNE H  
STREET ADDRESS 941 4TH STREET, #200M  
CITY-ST-ZIP MIAMI BEACH FL

TITLE ☒ Change ☐ Add  
NAME Christianne Helena Louise Creber  
STREET ADDRESS Little Rocques Flat, Rocques de St Clair, Rue des Pointes  
CITY-ST-ZIP Delancey, St Sampsons, Guernsey GY2 4HN, Channel Islands

TITLE MGR ☐ Delete  
NAME EATON, CHRISTOPHER P  
STREET ADDRESS 941 4TH STREET, #200M  
CITY-ST-ZIP MIAMI BEACH FL

TITLE ☒ Change ☐ Add  
NAME Christopher Peter Eaton  
STREET ADDRESS Trollaby House, Trollaby Lane,  
CITY-ST-ZIP Union Mills IM4 4AW, Isle of Man, U.K.

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Add  
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

JTG DONNELLY

18/01/00

00 44 148183 2201

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #