

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L99000006189

FILED  
Apr 22, 2002 8:00 AM  
Secretary of State

Entity Name: LARTRADE LLC

**Current Principal Place of Business:**

941 4TH STREET, STE #200M  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

941 4TH STREET, STE #200M  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS ENTERPRISES INC  
941 4TH STREET #200  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: DONNELLY, JOHN TREVOR G MR  
Address: RUE DU MOULIN, SARK  
City-St-Zip: CHANNEL ISLANDS, UK UK

Title: MGR (X) Delete  
Name: PETERS, SAMANTHA MS  
Address: LA PETITE VALLETTE, SARK  
City-St-Zip: CHANNEL ISLANDS, UK UK

Title: MGR (X) Delete  
Name: EATON, CHRISTOPHER P MR  
Address: TROLLABY HOUSE, TROLLABY LANE  
City-St-Zip: UNION MILLS, ISLE OF MAN, UK IM44AW UK

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: WAYMAR SERVICES LIM, TED  
Address: P.O. BOX 3175, ROAD TOWN  
City-St-Zip: TORTOLA, BVI, BV BV

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JOHN BENJAMIN FOSTER

MR

04/22/2002

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date