

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000006884

1. Entity Name
ROJO RODAMI, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 AUG 24 AM 10:02

Principal Place of Business Mailing Address
69 S. ROYAL POINCIANA 69 S. ROYAL POINCIANA
MIAMI SPRINGS FL 33166-6058 MIAMI SPRINGS FL 33166-6058



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **05-0955545** Applied For
Not Applicable

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

GUTTER, JOSEPH & RUFFIN, P.A.
100 W. CYPRESS CREEK RD, STE 900
FT LAUDERDALE FL 33309

Name **DARIO A. NAVARRO**
Street Address (P.O. Box Number is Not Acceptable)
669 W. 14 STREET
City **HIALEAH** FL Zip Code **33010**

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 RA DATE **8/22/00**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

300003384513--9
-09/06/00--0114--010
*****50.00 *****50.00

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		MANAGER	
STREET ADDRESS		DARIO NAVARRO	
CITY-ST-ZIP		669 W. 14 ST	
		HIALEAH FL 33010	
TITLE	<input type="checkbox"/> Delete	MANAGER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		MIGUEL A. CABRERA	
STREET ADDRESS		1920 SW 86 AVE	
CITY-ST-ZIP		MIAMI, FL 33155	
TITLE	<input type="checkbox"/> Delete	MANAGER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		ROSA E. RAMOS-BOTTA	
STREET ADDRESS		1920 SW 86 AVE.	
CITY-ST-ZIP		MIAMI, FL 33155	
TITLE	<input type="checkbox"/> Delete	MANAGER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		JOSE GARCIA	
STREET ADDRESS		69 S. ROYAL POINCIANA	
CITY-ST-ZIP		MIAMI SPRINGS, FL 33166-6058	
TITLE	<input type="checkbox"/> Delete	MANAGER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		ROBERT A. BRANDT	
STREET ADDRESS		57 S. ROYAL POINCIANA	
CITY-ST-ZIP		MIAMI SPRINGS, FL 33166-6058	
TITLE	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> 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: **DARIO NAVARRO** DATE **8/22/00** DAYTIME PHONE # **(305) 888-3119**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #

CR2E083 (5/00)