

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 90124 016 \*\*\*\*50.00

**DOCUMENT # L99000007310**

1. Entity Name

**ASSET & WEALTH PROTECTION, LLC**



Principal Place of Business

**4367 NORTH FEDERAL HIGHWAY, SUITE 104  
FORT LAUDERDALE FL 33308**

Mailing Address

~~6278 N. FEDERAL HIGHWAY, #407~~  
~~FORT LAUDERDALE FL 33308~~  
**2046 TREAS COAST PLZ #370  
VERO BEACH, FL 32960**

2. Principal Place of Business

3. Mailing Address

**2046 TREAS COAST PLAZA  
#370**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**VERO BEACH, FL**

4. FEI Number **65-0958127**

Applied For  
Not Applicable

Zip

Country

Zip

Country

**32960**

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

~~GONZALEZ, GEORGE C~~

~~4367 NORTH FEDERAL HIGHWAY, SUITE 102~~

~~FORT LAUDERDALE FL 33305~~

Name: **JORGE A. COLON**

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

**4367 N. FEDERAL HWY., SUITE 101**

City **FORT LAUDERDALE**

**FL**

Zip Code **33308**

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

**JORGE A. COLON, MANAGER**

**1/26/03**

Signature, typed or printed name of registered agent and date 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

TITLE **MGRM** ☒ Delete  
NAME ~~GONZALEZ, GEORGE C~~  
STREET ADDRESS ~~4367 NORTH FEDERAL HIGHWAY, SUITE 104~~  
CITY-ST-ZIP ~~FORT LAUDERDALE FL 33305~~

TITLE **MANAGER** ☐ Change ☒ Addition  
NAME **JORGE A. COLON**  
STREET ADDRESS **4367 N. FEDERAL HWY. #101**  
CITY-ST-ZIP **FORT LAUDERDALE, FL 33308**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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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**

**JORGE A. COLON, MANAGER**

**1/26/03**

**954822229**

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

Date

Daytime Phone #

CR2E083 (10/02)