## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M0000001330  1. Entity Name SIMA/CARIBBEAN ISLE, LLC				FILED OI APR -6 PM 4: 15	
Principal Place of Business Mailing Address			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
115 WEST CANON PERDIDO. SUITE 200 115 WEST CANON PERDIDO. SUITE 200 SANTA BARBARA CA 93101 SANTA BARBARA CA 93101					
2. Principal	Place of Business	3. Mailing Address		T (\$51250) 311 BOLLI DOLLI GOLLI OCLIF EDIC) DEVOL FRANCISCO ILEGA ICINI DOLLI INI	
Suite, Apt. #, etc. S		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State C		City & State		4. FEI Number Applied For 77 - 054 720 4 Not Applical	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$5.00 Additional Fee Required	
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent	
DADAGG	RP INCORPORATED		~ Name		
236 EAS	T 6TH AVE.		Street Addres	s (P.O. Box Number is Not Acceptable)	
IALLAMA	ASSEE FL 32303				
			City	FL Zip Code	
			NOW!!! FEE IS \$50.0 Payable to Department		
9.	MANAGING MEM	BERS/MEMBERS	10.	ADDITIONS/CHANGES	
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indicated	certify that the information subdisc wi d on this report is true and accurate an ability company or the pectiver or truste	d that my signature shall have	e the same legal effect as i	Section 119.07(3)(i), Florida Statutes. I further certify that the information if made under oath; that I am a managing member or manager of the apter 608, Florida Statutes.	