

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 03, 2004 08:00 AM
Secretary of State

DOCUMENT # M02000001451

1. Entity Name
PUEBLO INTERNATIONAL, LLC



Principal Place of Business
CAMPO RICO AVENUE
CORNER LOIZA EXPRESSWAY
CAROLINA, PR 00982

Mailing Address
ATT-TAX DEPT
1300 NW 2ND STREET
POMPANO BEACH, FL 33069



01192004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
66-0213117

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

VEGA, JOSE
1300 NW 22ND STREET
POMPANO BEACH, FL 33069

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
CISNEROS, GUSTAVO A
1300 NW 22ND STREET
POMPANO BEACH, FL 33069

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
KEON, WILLIAM T III
1300 NW 22ND STREET
POMPANO BEACH, FL 33069

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
BANDEL, STEVEN
1300 NW 22ND STREET
POMPANO BEACH, FL 33069

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
RIVERA, ALEJANDRO
1300 NW 22ND STREET
POMPANO BEACH, FL 33069

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
PIERETTI, CRISTINA
1300 NW 22ND STREET
POMPANO BEACH, FL 33069

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
CISNEROS, GUILLERMO
1300 NW 22ND STREET
POMPANO BEACH, FL 33069

000000027123
02/03/04-80032-032 5.00

000000027123
02/03/04-80032-033 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Daniel J. O'Kmy*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/25/04
Date

954-977-2000
Daytime Phone #