## 2000 UNIFORM BUSINESS REPORT (UBR)

2000 UNIFORM BUSINESS REPORT (UBR)											•	ļ	APPROV	'ED
DO@UMENT # <b>Z00238</b>													AND FILED	)
1. Entity Name RONAN MIAMI, L.C.									00.MAY -4 PM12: 10					
					-	RICKELL AVENUE. SUITE D-1					<b>)</b> :	SECRE 720	TARY OF LASSEE. 561	F STATE FLORIDA
Principal Place of Business     3. Mailing Address									1	INDIA BULLIA BUILLA	FILO 15000 1110		0   0	Děl Bibli l <b>at</b> i
Suite, Apt. #, etc. S					Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State				Ci	City & State				4. FEI Number 65-0196214 Applied For Not Applicable					
Zip	Country		Zi	Zip		Country		5. Certif	icate of Status	Desired		\$5.00 Add Fee Required		
6. Name and Address of Current Registered Agent							Name		7. Name	and Address	of New Re	gistered	Agent	
DAVID, MARYANN Y								ddress (P.0	P.O. Box Number is Not Acceptable)					
2333 BRICKELL AVENUE, SUITE D-1 MIAMI FL 33129										· ·		<del></del>		
WILCOUT I L OU I LO							City		FL Zip Code					)
8. The above	named entity	submits	this statement t	or the pu	rpose of changing its	registere	ed office or	registered	d agent, o	or both, in the S	State of Flor			
SIGNATURE .		4												
- CIGITATORE	Signature, typed or	printed nar	ne of registered agen	t and title if a	pplicable. (NOT	E: Registere	d Agent signatur	re required w	hen reinstatir	ng)		DATE		
FILE NO Make Check Pa							FEE IS \$5 o Departn		State					
9.		MA	NAGING MEMI	BERS/ME	EMBERS	10.				AD	DITIONS/	CHANGES		
TETLE NAME STREET ADDRESS CITY-ST-ZIP	M ROSEN, NO 2333 BRICK MIAMI FL 33	ELL AV	s. Enue, suite	E D-1	□ Detate		1						Change	Addition
TITLE NAME STREET ACCRESS CITY-ST-ZIP	M ROSEN, CL 2333 BRICK MIAMI FL 3	ELL AV	enue, suite	E D-1	☐ Delete								Change	Addition
TITLE	-		سید ۔ • مسکر		C Detete			•	ţ	3000 *	032 5/3070 *****50	696 1001 1.00	3 <b>G Change</b> 101001 ******50	
TITLE MAME STREET ADDRESS GITY-ST-ZIP					☐ Delete	4							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-82-ZIP					□ Delete								☐ Change	Addition
TITLE MAME STREET ADDRESS GITY-SI-ZIP			,		☐ Deteto						`		☐ Change	Addition
	toertify that the income on this report	informati	on supplied wi	th this filind that my	ng does not qualify fo signature shall have			ed in Sect	ion 119.0 de under	7(3)(i), Florida oath; that I an	Statutes. I	further ce	rtify that the in er or manage.	formation r of the