

FILED
May 01, 2002 8:00 am
Secretary of State

04-02-2002 90965 040 ****50.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000018875

1. Entity Name

ZOE ENTERPRISES, L.L.C.

Principal Place of Business

21205 YACHT CLUB DRIVE
#808
AVENTURA FL 33180

Mailing Address

21205 YACHT CLUB DRIVE
#808
AVENTURA FL 33180

27225-

2. Principal Place of Business

1543 NE 194TH STREET

3. Mailing Address

1543 NE 194TH STREET



DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

NORTH MIAMI BEACH

Suite, Apt. #, etc.

City & State

FL

City & State

NORTH MIAMI BEACH FL

4. FEI Number

65-1156177

Applied For

Not Applicable

Zip

33179

Country

USA

Zip

33179

Country

USA

5. Certificate of Status Desired ☐\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SERBER, DANIEL J ESQ.
2875 N.E. 191ST STREET SUITE #801
AVENTURA FL 33180

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS / MANAGERS

TITLE MGRM
 NAME DG INVESTMENTS LIMITED, INC.
 STREET ADDRESS 21205 YACHT CLUB DRIVE
 CITY-ST-ZIP AVENTURA FL 33180 ☐ Delete

TITLE MGRM
 NAME GAMBARD, DANIEL
 STREET ADDRESS 21205 YACHT CLUB DRIVE
 CITY-ST-ZIP AVENTURA FL 33180 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

10. ADDITIONS / CHANGES

TITLE MGRM
 NAME DG INVESTMENTS LIMITED, INC.
 STREET ADDRESS 1543 NE 194TH STREET
 CITY-ST-ZIP NORTH MIAMI BEACH - FL 33179 ☒ Change ☐ Addition

TITLE MGRM
 NAME GAMBARD, DANIEL
 STREET ADDRESS 1543 NE 194TH STREET
 CITY-ST-ZIP NORTH MIAMI BEACH - FL 33179 ☒ Change ☐ Addition

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

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 CITY-ST-ZIP ☐ Change ☐ Addition

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

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

Date

Daytime Phone #

CR2E083 (9/01)