

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90025 009 ****50.00

DOCUMENT # L01000021113

1. Entity Name

AAA PROPERTIES, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1730 S. FEDERAL HIGHWAY SUITE 205

3. Mailing Address

1730 S. FEDERAL HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

205

DO NOT WRITE IN THIS SPACE

City & State

DELRAY BEACH, FL.

City & State

DELRAY BEACH

4. FEI Number

65-1157468

Applied For

Not Applicable

Zip

33483

Country

USA

Zip

33483

Country

USA

5. Certificate of Status Desired

\$5.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

ARPAD TOTTH

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

1730 S. FEDERAL HIGHWAY

SUITE 205

City

DELRAY BEACH

FL

Zip Code

33483

**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.

SIGNATURE

Arpad Totth

ARPAD TOTTH

4-1-02

DATE

FEE IS \$50.00

Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	EXECUTIVE DIRECTOR/MEMBER ARPAD TOTTH 1730 S. FEDERAL HIGHWAY SUITE 205 DELRAY BEACH, FLORIDA 33483
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/MANAGER ROY W. TALLING 1730 S. FEDERAL HIGHWAY SUITE 205 DELRAY BEACH, FLORIDA 33483
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**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)(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: *Arpad Totth* ARPAD TOTTH

4-1-02

561-573-4250

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

Date

Daytime Phone #

CR2E089B (12/01)