

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

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91533 036 ****50.00

DOCUMENT # L96000000 525

1. Entity Name

CIVINS HILLER MULTIMEDIA, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1001 W CYPRESS CREEK RD.

3. Mailing Address

1001 W CYPRESS CREEK RD

(Suite, Apt. #, etc.)

114

(Suite) Apt. #, etc.

114

City & State
FT LAUDERDALE FL

City & State
FT LAUDERDALE FL

4. FEI Number

65-0664317

Applied For

Not Applicable

Zip

33309

Country

USA

Zip

33309

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fees Required

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**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

CIVINS, GARY I.

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

1001 W CYPRESS CREEK RD

SUITE # 114

City

FT LAUDERDALE

FL

Zip Code

33309

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.

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
MGRM
CIVINS, GARY I.
1001 W CYPRESS CREEK RD #114
FT LAUDERDALE FL 33309

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
HILLER, ANATOL
1001 W CYPRESS CREEK RD #114
FT LAUDERDALE FL 33309

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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:

GARY CIVINS

4/29/02 954938 8600

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

Date

Daytime Phone #