

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2002 8:00 am
Secretary of State

0013484

DOCUMENT # L99000005963

1. Entity Name

ORANGE HARMONY LLC

04-03-2002 90021 022 ****50.00

Principal Place of Business

**721 S.E. 17TH STREET
 STE 200
 FORT LAUDERDALE FL 33316**

Mailing Address

**721 S.E. 17TH STREET
 STE 200
 FORT LAUDERDALE FL 33316**

000428



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1401 Dewey Street

3. Mailing Address

1401 Dewey Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HOLLYWOOD, FL

City & State

HOLLYWOOD, FL

4. FEI Number

65-0951571

Applied For

Not Applicable

Zip

33020

Country

Zip

33020

Country

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LAMOTHE, FERNAND
 721 S.E. 17TH STREET
 STE 200
 FORT LAUDERDALE FL 33316**

Name **LAMOTHE, FERNAND**

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

1401 DEWEY STREET

City **HOLLYWOOD**

FL

Zip Code

33020

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.

(same registered agent)

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

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Delete
 NAME **HARMONY CORPORATION OF USA**
 STREET ADDRESS **721 S.E. 17TH ST., STE 200**
 CITY-ST-ZIP **FORT LAUDERDALE FL**

TITLE **MGR** ☒ Change ☐ Addition
 NAME **HARMONY CORPORATION OF USA**
 STREET ADDRESS **1401 DEWEY STREET**
 CITY-ST-ZIP **HOLLYWOOD, FL 33020**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

YVAN BONIFACE

Date

Daytime Phone #

March 8, 2002

CR2E083 (9/01)