

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

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90035 044 *****50.00

DOCUMENT # **L02000008538**

1. Entity Name

PMJ Enterprises LLC dba ~~Palm Beach~~
~~Lincoln Mercury~~



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2301 Okeechobee Blvd

Suite, Apt. #, etc.

3. Mailing Address

2301 Okeechobee Blvd

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
West Palm Beach, Florida

City & State
West Palm Beach Florida

4. FEI Number 01-0662691

Applied For
Not Applicable

Zip
33409

Country
USA

Zip
33409

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name John A Egan

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

2301 Okeechobee Blvd

City West Palm Beach

FL

Zip Code
33409

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

4-14-03

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Member/ Partner/Manager MGRM
John A Egan 2301 Okeechobee Blvd
West Palm Beach FL 33409

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Member/Partner/Manager MGRM
Michael Rozowicz 2301 Okeechobee Blvd
West Palm Beach, FL 33409

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Member/Partner/Manager MGRM
Peter Wolofsky 2301 Okeechobe Blvd
West Palm Beach, FL 33409

TITLE
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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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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:

4-14-03

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

Date

Daytime Phone #

CR2E03B (12/02)