

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

00 MAY 16 AM 10:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

L00000000115

1. Entity Name

ZUCKERMAN CUSTOM HOMES, L.L.C.

Principal Place of Business

Mailing Address

6351 San Michel Way  
Delray Bch, FL 33484

6351 San Michel Way  
Delray Bch, FL 33484

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0996939

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Peter M. Hodkin

One East Broward Boulevard, Suite #1501  
Fort Lauderdale, FL 33301

Name

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

City

FL

Zip Code

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**

MANAGING MEMBERS/MEMBERS

10.

ADDITIONS/CHANGES

☐ Delete

TITLE

Manager/Member

☐ Change

☐ Addition

NAME

Andrew Zuckerman

STREET ADDRESS

6351 San Michel Way

CITY-ST-ZIP

Delray Beach, FL 33484

☐ Delete

TITLE

Manager/Member

☐ Change

☐ Addition

NAME

David Zuckerman

STREET ADDRESS

6351 San Michel Way

CITY-ST-ZIP

Delray Beach, FL 33484

☐ Delete

TITLE

Manager/Member

☐ Change

☐ Addition

NAME

Steven Zuckerman

STREET ADDRESS

6351 San Michel Way

CITY-ST-ZIP

Delray Beach, FL 33484

☐ Delete

TITLE

Manager/Member

☐ Change

☐ Addition

NAME

Neil Dubin

STREET ADDRESS

6351 San Michel Way

CITY-ST-ZIP

Delray Beach, FL 33484

☐ Delete

TITLE

☐ Change

☐ Addition

NAME

600003279246

STREET ADDRESS

06/07/00-01010-003

CITY-ST-ZIP

\*\*\*\*\*50.00 \*\*\*\*\*50.00

☐ Delete

TITLE

☐ Change

☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

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:

Andrew Zuckerman 4/27/00

(561) 637-9225

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (11/99)