

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90575 009 ****50.00

DOCUMENT # L00000000886

1. Entity Name

CIGARZ AT THE ORLANDO ARENA, LLC



Principal Place of Business

**600 WEST AMELIA STREET
ORLANDO FL 32801**

Mailing Address

**290 N. BEACH STREET
DAYTONA BEACH FL 32801**

2. Principal Place of Business

3. Mailing Address

2871 N. Federal Highway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Ft. Lauderdale, FL

Zip

Country

Zip

Country

33306

USA

4. FEI Number

59-3673458

Applied For

Not Applicable

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

**ROSSMEYER, BRUCE
290 N. BEACH STREET
DAYTONA BEACH FL 32114**

Name

Bruce Rossmeier

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

2871 N. Federal Highway

City

Ft. Lauderdale

FL

Zip Code

33306

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/9/03

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
ROSSMEYER, BRUCE
290 N. BEACH STREET
DAYTONA BEACH FL 32114** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**2871 N. Federal Highway
Ft. Lauderdale, FL 33306** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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

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:

BRUCE ROSSMEYER **1/9/03** **954-724-2800**

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

Date

Daytime Phone #

CR2E083 (10/02)