## 2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # L0000003228

1. Entity Name



FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90077 033 \*\*\*\*50.00

PROCESS PRICE SIVE.  22 Principal Place of Business  23 Multing Address  24 Principal Place of Business  25 Multing Address  26 Principal Place of Business  26 Multing Address  26 Principal Place of Business  26 Multing Address  26 Principal Place of Business  27 Country  28 Multing Address  29 Country  29 Country  20 Country  30 Country  30 Country  40 Principal Place of Business  26 Principal Place of Business  27 Country  29 Country  30 Country  40 Principal Place of Business  26 Principal Place of Business  27 Country  29 Country  30 Country  40 Principal Place of Business  30 Address of New Registered Agent  70 Name and Address of New Reg	925 PARK PLACE, LLC						30 3 <b>2 2</b> 332 3331.		
SANCE   1985A   1980	Principal Plac	e of Business	Mailing Address			[			
Suite	19501 BISCAYNE BLVD. SPACE #1659-A		2315 NW 107TH AVE. BOX 111	2315 NW 107TH AVE. BOX 111		  - 	NI BU BON BUN BUN BUN BUN BUN BUN BUN BUN BUN BU	<b>BB(88</b> 1111 <b>0</b> 11 <b>010</b> 11	<b>ffi (\$</b> )1 L <b>0</b> 8L
City & Siste    Country   Zip   Country   Size   Country   S. Certificate of Status Desired   Set Nov Applicable	2. Principal F	Place of Business	3. Mailing Address	3. Mailing Address					
TANEY, DAVID   1949S BISCAYNE BLVD. SUITE 300   Address of Current Registered Agent   TANEY, DAVID   1949S BISCAYNE BLVD. SUITE 300   AVENTURA FL 35180   Aventure and entity submitts this statement to the purpose of changing its registered office or registered agent, or both, in the State of Fordia. I am turniflar value, and acceptable   STATE Address of New Registered Agent   TANEY, DAVID   1949S BISCAYNE BLVD. SUITE 300   TELL   TANEY, DAVID   1949S BISCAYNE BLVD. SUITE 300   AVENTURA FL 35180   TELL   TANEY, DAVID   TELL   TEL	Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		}	☐ CHECK HERE IF MAK	ING CHANGES	<b>;</b>
Name and Address of Current Registered Agant   7. Name and Address of New Registered Agant   7. Name and Name an	City & State		City & State	City & State		4. FEI Num	91-2032483		<del>``</del>
TANEY, DAVID J 19495 BISCAYNE BLYD. SUITE 300 AVENTURA R.I. 33180	Zip	Country	Zip	Cour	ntry	5. Certifica	te of Status Desired		
TAMEY, DAVID J 19495 BISCAYNE BLVD. SUITE 300 AVENTURA FL 33180    City   FL   Zip Code   The above named antily submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Lien familier with, and accept the obligations of registered agent. Signature to registered agent, or both, in the State of Florida. Lien familier with, and accept the obligations of registered agent. Signature trained when remarking its registered agent, or both, in the State of Florida. Lien familier with, and accept the obligations of registered agent. Signature trained when remarking its registered agent, or both, in the State of Florida. Lien familier with, and accept the obligations of registered agent, or both, in the State of Florida. Lien familier with, and accept the obligations of registered agent, or both, in the State of Florida. Lien familier with, and accept the obligations of registered agent. Signature trained when remarking its registered agent, or both, in the State of Florida. Lien familier with and accept the obligations of registered agent. Signature trained when remarking its registered agent, or both, in the State of Florida. Lien familier with and accept the obligations of registered agent, or both, in the State of Florida. Lien familier with and accept the obligations of registered agent, or both, in the State of Florida. Lien familier with and accept the obligations of registered agent, or both, in the State of Florida.    MGRIM		- 6. Name and Address of Curre	nt Registered Agent			7. Name ar	nd Address of New Register	ed Agent	
Sireat Address (P.O. Box Number is Not Acceptable)  SUITE 300 AVENTURA PL 33180  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. Item transitur with, and accept the obligations of registered agent.  SIGNATURE  David Taney  SPECIAL TANEY	TANK	EV DAVID I			Name				
AVENTURA FL 33180  6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Floridat. Terminal with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with, and accept the obligations of registered agent, or both, in the State of Floridat. Part with and accept the obligations of registered agent, or both, in the State of Floridat. Part with and accept the obligations of registered agent, or both, in the State of Floridat. Part and accept the part and accep	1949	5 BISCAYNE BLVD.		Street Addre		P.O. Box Num	ber is Not Acceptable)		
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. Term familiar with, and accept the obligations of registered agent.  SIGNATURE    David Taney					City	<u></u>		Zip Coo	de
SIGNATURE DAVId Tancy   Signature, tyrod or private diagnature diagnature and see it applicable.   INDIE Registered Agent spriature recurred who remissaring   C-1 c DMS					<u> </u>		<u> </u>	<u> </u>	
NORTHINE   NORTH			t for the purpose of changing i	ts register	ed office or registere	ed agent, or b	ooth, in the State of Florida. Ta	m tamiliar with,	and accept
FILE NOW!!! FEE IS \$50.00 · Make Check Payable to Florida Department of State Due By May 1, 2003  9. MANAGING MEMBERS / MANAGERS TITLE NAME STREET ADDRESS CITY-51-2P TITLE NAME STREET ADDRESS CITY							01/31	/03	
Make Check Payable to Florida Department of State Due By May 1, 2003   MANAGING MEMBERS   MANAGERS   10.	SIGNATURE .	Signature, typed or printed name of registered ag	ent and title if applicable. (NO	OTE: Registere	nd Agent signature required	when reinstating)			}
9. MANAGING MEMBERS / MANAGERS 10. ADDITIONS / CHANGES   Addition   MGRM									
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		ertify that the information supplied w	ith this filing does not qualify f			ction 119 07/3	3)(i) Florida Statutes I further	certify that the i	nformation

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 ING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 01/31/03

305-716-7448

Daytime Phone #