

**\*AMENDED\***

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

APPROVED  
AND  
FILED

02 APR 25 AM 9:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **L 00000004906**

1. Entity Name  
1721 Associates, L.L.C.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 3361 S.W. 3 <sup>rd</sup> Avenue		3. Mailing Address 3361 S.W. 3 <sup>rd</sup> Avenue	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Miami, FL		City & State Miami, FL	
Zip 33145	Country USA	Zip 33145	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1401652	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
**Ivor J. Bamberger**

Street Address (P.O. Box Number is Not Acceptable)  
**3361 S.W. 3<sup>rd</sup> Avenue**

City **Miami** FL Zip Code **33145**

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**DUE BY MAY 1**

**000005430590--9**  
**-05/02/02--01039--019**  
**\*\*\*\*\*50.00 \*\*\*\*\*50.00**

9. MANAGING MEMBERS / MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGR</b> <b>Beber, Silverstein &amp; Partners Advertising, Inc.</b> <b>3361 S.W. 3rd Avenue</b> <b>Miami, FL 33145</b>
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CR2E083B (12/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *E. Silverstein* **E. SILVERSTEIN** Date 4/10/02

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