

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000005677

1. Entity Name  
 JS & VS Management LLC II  
 1824 South Ocean Drive  
 Fort Lauderdale, Fla 33316

**FILED**

01 JUN 20 AM 11:10

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
 1824 South Ocean Drive  
 Fort Lauderdale, Fla 33316

2. Principal Place of Business same  
 Suite, Apt. #, etc.

3. Mailing Address same  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
 Fort Lauderdale, Fla  
 Zip Country  
 33316

City & State  
 Zip Country

4. FEI Number  
 65-1008038

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

Joseph Sirhal  
 1824 South Ocean Drive  
 Fort Lauderdale, Fla 33316

Name  
 Joseph Sirhal  
 Street Address (P.O. Box Number is Not Acceptable)  
 1824 South Ocean Drive  
 Fort Lauderdale, Fla 33316  
 City FL Zip Code

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 *Joseph Sirhal MGRMS-1-001*  
 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**

9. MANAGING MEMBERS/MEMBERS  
 TITLE NAME  Delete  
 Joseph Sirhal MANAGER  
 STREET ADDRESS  
 1824 South Ocean Drive  
 CITY-ST-ZIP  
 Fort Lauderdale, Fla 33316

10. ADDITIONS/CHANGES  
 Change  Addition  
 TITLE NAME  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 900004452559--1  
 -07/02/01--01008--021  
 \*\*\*\*\*50.00 \*\*\*\*\*50.00

TITLE NAME  Delete  
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TITLE NAME  Change  Addition  
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TITLE NAME  Change  Addition  
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 CITY-ST-ZIP

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: *Joseph Sirhal MGRMS-1-001* JOSEPH SIRHAL 1-1-001 954 5226847  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)