

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000005755

1. Entity Name

YACHT ONE SERVICES GROUP LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 SEP 25 PM 9:44

Principal Place of Business

1475 SOUTHEAST 15TH STREET, UNIT #110
FORT LAUDERDALE FL 33316

Mailing Address

1475 SOUTHEAST 15TH STREET, UNIT #110
FORT LAUDERDALE FL 33316

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

651007959

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name STEPHEN W. GILBERTSON

Street Address (P.O. Box Number is Not Acceptable)
2200 N.E. 26TH ST.

City MIAMI MANHATTAN

FL

Zip Code

33135

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

W. L. THOMSON

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

(NOTE: Registered Agent signature required when reinstating)

DATE

September 13, 2001

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By September 26, 2001

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME THOMSON, WILLIAM L
STREET ADDRESS 1475 SOUTHEAST 15TH STREET, UNIT #110
CITY-ST-ZIP FORT LAUDERDALE FL 33316

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10. ADDITIONS/CHANGES

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CITY-ST-ZIP

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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:

W. L. THOMSON

September 13, 2001 (954) 805 7966

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

Date

Debit/Phone #

CR2E083 (5/01)

0004672

STAPLE CHECK HERE