2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000006651



FILED Feb 17, 2003 8:00 am Secretary of State

1. Entity Nar 320 BEL\	^{ne} /EDERE, L	LC .						02-17-2003	90003 01	7 ****50	.00	
Principal Place of Business 320 BELEVEDERE RD. WEST PALM BEACH FL 33405			320	Mailing Address 320 BELEVEDERE RD. WEST PALM BEACH FL 33405								
2. Principal f	Place of Busin	ness	3. M	failing Address								
Suite, Apt. #, etc.			S	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			С	ity & State	4. FEI Number 65-10209		15 Applied For Not Applicable					
Zip Country .			Zip Cour		try	5. Certifica	te of Status Desired		\$5.00 Ad Fee Require			
	6. Name	and Address of Curre	nt Registe	ered Agent			7. Name ar	nd Address of New	Registered /	\gent		
320	RUE, PHILLII BELEVEDE ST. PALM. RE		_			_	TC SUC ss (P.O. Box Num	ber is Not Acceptab	le			
W.C.	OT I ALIVI DE	LACITIE 30403				0::						
		•	•			City			FL	Zip Coc	le	
8. The above	named entity	submits this statement	t for the pu	rpose of changing it	s registere	d office or regis	stered agent, or b	oth, in the State of F	lorida. I am f	amiliar with,	and accept	
the obligat	tions of regist	ered agent.										
SIGNATURE	Signature, typed	or printed name of registered age	ent and title if a	mulicable (NO	TE: Bonintorod	Agent signst us requi	uired when reinstating)	 	DATE			
)	
			RA:	FILE N	IOW!!! F	EE IS \$50.00	0		DATE			
			Ma	FILE N ake Check Payat	IOW!!! Fole to Flo	EE IS \$50.00 orida Departm	0		DATE		;	
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his 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.