

2001 UNIFORM BUSINESS REPORT (UBR)

0012790 AF

DOCUMENT # L00000006792

1. Entity Name
HTMCB RETAIL OF COCONUT GROVE, LLC

FILED

01 FEB 12 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
3015 GRAND AVE
MIAMI FL 33133

Mailing Address
8211 W BROWARD BLVD
SUITE 200
PLANTATION FL 33324-2726

2. Principal Place of Business
20432 N.E 16th Pl

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1030841

Applied For

Not Applicable

Zip
33179

Country

U.S.A

Zip

Country

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

TORCHIN, DAVID CPA
8211 W BROWARD BLVD
SUITE 200
PLANTATION FL 33324-2726

Name

Street Address (P.O. Box Number is Not Acceptable)

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

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

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
CORCOS, ARI
3015 GRAND AVE
MIAMI FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
CORCOS Arie
20432 N.E 16th Pl.
N. Miami FL 33179 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ALTIT, ALAIN
3015 GRAND AVE
MIAMI FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
Jacobson Jillian
20432 N.E 16th Pl
N. Miami FL 33179 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
BOTTON, NENO
5514 S.W. 28TH TERRACE
FORT LAUDERDALE FL 33312 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ALTIT ALTIT
20432 N.E 16th Pl
N. Miami FL 33179 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
Botton Neno
20432 N.E 16th Pl
N. Miami FL 33179 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

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

02/06/01

Date

305-690-0105

Daytime Phone #

CR2E083 (11/00)