2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000007262

BROKEN SOUND UNITED LLC



FILED Apr 14, 2003 8:00 am Secretary of State 04-14-2003 90232 016 ****50.00

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CROWE, MELISSA 7777 GLADES ROUS SIDER ADDITIONS / Change and Address of Current Registered Agent Name CROWE, MELISSA 7777 GLADES ROUS SIDER ADDITIONS / CHANGES BOCA RATION FL 33434 City City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with and accept the obligation and registered agent, or both, in the State of Florida. I am familiar with and accept the obligations agent a	City & State	6	City & State			4. FEI Num	nber 65-1022808	3	- - - 		
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B. The above named entity submits this statement for the purpose of changing its registered eigent, or both, in the State of Portica. I am familiar with, and accept the collegations of registered eigent. Signiful											
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		partify that the information expedied with	this filing does not qualify for			Section 119.07/	Wi) Florida Statutas I	further cost	fu that the i	nformation	

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