2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

Mailing Address

751 SW 66TH AVE.

3. Mailing Address

City & State

Suite, Apt. #, etc.

NORTH LAUDERDALE FL 33068

DOCUMENT # L0000011712

Country

1. Entity Name

751 SW 66TH AVE.

Principal Place of Business

NORTH LAUDERDALE FL 33068

2. Principal Place of Business

KAPLAN, EDWARD S

Suite, Apt. #, etc.

City & State

Zip

E.S. KAPLAN - HILLSBORO, LLC

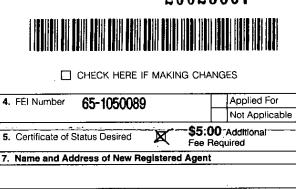


FILED Feb 11, 2003 8:00 am Secretary of State

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Zin Code



751 SW 66TH AVE.

NORTH LAUDERDALE FL 33068

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

City

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. I am familiar with, and accept the obligations of registered agent.

Name

SIGNATURE -

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

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State

Due By May 1, 2003

9.	MANAGING MEMBERS/	MANAGERS	10.	ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KAPLAN, EDWARD S TRUSTEE 751 SW 66TH AVE. NORTH LAUDERDALE FL 33068	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition
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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.

> CM ak

COM DEINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

\$ 979-3475 Date Destine Phone #