

2001-UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000013332

1. Entity Name

CAPITAL NETWORKS, LLC

FILED

01 JUN -5 AM 7:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
767 SOUTH STATE ROAD 7, SUITE 20
MARGATE FL 33068

Mailing Address
767 SOUTH STATE ROAD 7, SUITE 20
MARGATE FL 33068

2. Principal Place of Business

3. Mailing Address

2141 North University Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

215

City & State

City & State

Coral Springs, Florida

4. FEI Number

65-1054715

Applied For

Not Applicable

Zip

Country

Zip

Country

33071

USA

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

BELLO, LAWRENCE
767 SOUTH STATE ROAD 7, SUITE 20
MARGATE FL 33068

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

4/16/01

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
President
LAWRENCE BELLO
2141 N. UNIVERSITY DRIVE #25
CORAL SPRINGS, FL 33071

☐ 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.

SIGNATURE:

LAWRENCE BELLO

4/16/01

954 6093892

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

Date

Daytime Phone #

CR2E083 (11/00)

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