2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT	#	_00000014381	

1. Entity Name

BPNT I, LLC



FILED Feb 05, 2003 8:00 am Secretary of State 02-05-2003 90029 033 ****50.00

S. Name and Address of Current Registered Agent 6. Name and Address of Current Registered Agent MOORE, MICHAEL 2269 6-W- 1-0171 STREET DEERFIELD BEACH FL 93442 8. The above named entity submits this statement for the purpower 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. FILE NOW!!! FEE IS \$5.0.0 Make Check Payable to Florida Department of State Due by May 1, 2003 9. MANAGING MEMBERS /MANAGERS 107-51-2P DEERFIELD BEACH FL 33442 DURGE MIGH. MGR JOHN MACATE SIREET ADDRESS 200 S.W. 1071h STREET DEERFIELD BEACH FL 33442 DURGE MIGH. MGR JOHN MACATE SIREET ADDRESS 200 S.W. 1071h STREET DEERFIELD BEACH FL 33442 DURGE MIGH. MGR JOHN STREET DEERFIELD BEACH FL 33442 DURGE MIGH. MGR JOHN STREET DEERFIELD BEACH FL 33442 DURGE MIGH. MGR MGR MGR MGR MGR MGR MGR MGR MGR MG				WE TO					
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B. Name and Address of Current Registered Agent MOORE, MICHAEL 2006 S.W. 10TH STREET DEERFIELD BEACH FL 39442 8. The above named entity submits this statement of the purpose expanging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 9. MANAGING MEMBERS / MANAGERS THE MORE JOHN MACATEE 1017 ST-2P DEERFIELD BEACH FL 33442 THE MGR MGR MGR MGR MGR MGR MGR MGR	Zip	Country		Country	5 Certific	ate of Status Desired	□ \$5.00	Additional	
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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 acetrate 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		ertify that the information supplied with the	is filips does not over!!f : f - : :		. Ca-41 110 0-11	200 50 11 20 11			

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SI