## **2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

## DOCUMENT # L00000015176

Principal Place of Business

## ANDREWS AVENUE PROPERTIES & INVESTMENTS, L.L.C.



**FILED** May 02, 2003 8:00 am Secretary of State 05-02-2003 90753 011 \*\*\*\*50.00

888 S.E. THIR( FT LAUDERDAI	) AVE., STE, 501 LE FL 33316		888 S.E. THIRD AVE STE. 501 FT LAUDERDALE FL 33316				1 18812	thi air da	10 <b>8 8</b> 121 <b>8 8</b> 211	<b>40</b> 111 <b>50</b> 211	22(2) 3(8	<b>e) e</b> del (( <b>1</b> ))	2 <b>2113 A</b> 131 1 <b>831</b>	
2. Principal Place of Business			3. Mailing Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.						HECK HE	RE IF M	AKING	CHANGE	S	
City & State			City & State				4. FEI Num	ber	65-1069	9890		<del></del>	Applied For	
Zip	Country Zip		Zip	Country			5. Certificate of S						\$5.00 Additional see Required	
•	6. Name ar	d Address of Current Reg	Istered Agent			7. Name ar	ıd Addr	ess of Ne	w Regis	tered A	gent			
888	RMAN, MILES	AUSTIN VE., STE. 501	garagen e		Street Address (P.O. Box Number is Not Acceptable)									
					City					FL	Zip Co	de		
	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.													
			FILE NO Make Check Payable Due	to Fle		partmen	t of State							
9.		MANAGING MEMBERS	MANAGERS	10.					ADDITIO	NS/CHA	NGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		VILLIAM W IIVERSITY DR., STE. D-1 IDALE FL 33351	103									☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FORMAN, N 888 S.E. TI	AILES AUSTIN HIRD AVE., STE. 501 IDALE FL 33316	☐ Delete									☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· · ·	☐ Delete				<b>.</b>				r Yangir a	□ Change	☐ Addition	
TITLE NAME Street Address City-St-Zip			☐ Delete	1								☐ Change	☐ Addition	
TITLE NAME Street Address City-St-Zip			☐ Delete						,			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete									☐ 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 the properties the safe 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.

Daytime Phone #