

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000015297

1. Entity Name

SWEAT EQUITY LLC

Principal Place of Business

845 AVON ROAD
WEST PALM BCH, FL 33401

Mailing Address

SAME AS

2. Principal Place of Business

845 AVON ROAD

Suite, Apt. #, etc.

3. Mailing Address

845 AVON ROAD

Suite, Apt. #, etc.

City & State

WEST PALM BEACH, FL

Zip

33401

Country

USA

City & State

WEST PALM BEACH, FL

Zip

33401

Country

USA

4. FEI Number

65-1065207

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

DALE M. PADGETT

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

845 AVON ROAD

City

WEST PALM BEACH

FL

Zip Code

33401

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ 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 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

Date

Daytime Phone #

FILED

2/21

01 FEB 21 PM 2:05

SECRETARY OF STATE
TALLAHASSEE FLORIDA

CR2E083 (11/00)