2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

DEERFIELD BEACH FL 33443-0163

P O BOX 163

DOCUMENT # L0100000379

Country

PENNACHIO, DENNIS

6. Name and Address of Current Registered Agent

1. Entity Name

DENNIS PENNACHIO, LLC

Principal Place of Business

DEERFIELD BEACH FL 33441

2. Principal Place of Business

412 E HILLSBORO BLVD

Suite, Apt. #, etc.

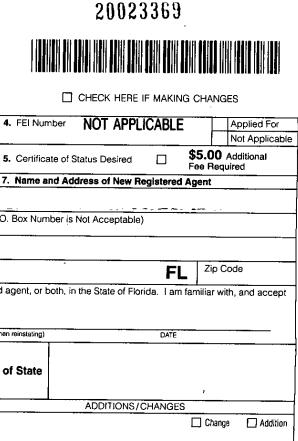
City & State

Zip



FILED Feb 05, 2003 8:00 am Secretary of State

02-05-2003 90032 030 ****50.00



412 E HILLSBORO BLVD DEERFIELD BEACH FL 33441		Street Address (P.O. Box Number is Not Acceptable)		
		City	FL Zip C	
The above named entity submits this statement for the the obligations of registered agent.	e purpose of changing its re	egistered office or registered agent, o	or both, in the State of Florida. I am familiar wit	h, and accept
SIGNATURE Signature, typed or printed name of registered agent and to	itle if applicable. (NOTE:	Registered Agent signature required when reinstatin	ng) DATE	
	Make Check Payable	W!!! FEE IS \$50.00 to Florida Department of Stat By May 1, 2003	e	
9. MANAGING MEMBERS.	MANAGERS	10.	ADDITIONS/CHANGES	
NAME PENNACHIO, DENNIS STREET ADDRESS 412 E HILLSBORO BLVD DEERFIELD BEACH FL 33441	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition -
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this indicated on this report is true and accurate and that	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition

Country

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'