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FILED
May 01, 2002 8:00 am
Secretary of State

02-05-2002 90072 036 ****50.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000000599

1. Entity Name
AAADVANTAGE, LC

Principal Place of Business	Mailing Address
1700 N.W. 33RD STREET POMPANO BEACH FL 33064	1700 N.W. 33RD STREET POMPANO BEACH FL 33064

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
1300 Eller Drive		P.O. Box 22338	
Suite, Apt. #, etc.: Port Everglades		Suite, Apt. #, etc.	
City & State: Ft. Lauderdale, FL		City & State: Ft. Lauderdale, FL	
Zip: 33316	Country: USA	Zip: 33335	Country: USA

4. FEI Number ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PRATHER, ROGER
1700 N.W. 33RD STREET
POMPANO BEACH FL 33064

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable): 1300 Eller Drive
Port Everglades
City: Ft. Lauderdale FL Zip Code: 33316

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
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGER Roger Prather 1300 Eller Dr Ft Lauderdale, FL 33316	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	member Adam Whitney 14812 Balgowan Rd Miami Lakes, FL 33016	☐ 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
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E083 (9/01)

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: X [signature] Roger D. Prather 1-30-02 (954)357-4747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #