

2002-2003  
**LIMITED LIABILITY COMPANY  
 UNIFORM BUSINESS REPORT (UBR)**

1 of 2

DOCUMENT # L01000001964

1. Entity Name

NAMI ENTERPRISES LLC



FILED

03 MAY 14 PM 12:20

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

1848 MIZELL AVENUE

Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 1375

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

WINTER PARK FL

City & State

GOLDENROD FL

4. FEI Number

59-3706864

Applied For

Not Applicable

Zip

32789

Country

USA

Zip

32733

Country

USA  
 ORANGE

5. Certificate of Status Desired ☐

\$5.00 Additional  
 Fee Required

7. Name and Address of Current Registered Agent

Name

CHRISTINE OKAMOTO

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

1848 MIZELL AVENUE

City

WINTER PARK

FL

Zip Code

32789

**DO NOT WRITE  
 IN THIS SPACE**

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.

SIGNATURE

*Christine Okamoto*

Signature, typed or printed name of registered agent and title if applicable.

4-30-03

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHRISTINE OKAMOTO 1848 MIZELL AVENUE WINTER PARK FL 32789	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	400018937634 05/14/03--01030--013 **50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	302192900693 07/02/02 90817 013 & 50.00
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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 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:

*Christine Okamoto*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-30-03

Date

4076735188

Daytime Phone #

CR2E083B (12/02)



292

nami enterprises

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April 30, 2003

Division of Corporations  
P.O. Box 6478  
Tallahassee, FL 32314

To Whom it May Concern,

RE: Document #L01000001964 Reinstatement

Last year, I received a notice that my UBR was processed but not filed because I did not write my title, Managing Member, in the appropriate space. I was asked to re-submit the paper with my title written in. While I have a record of re-submitting this on 7/18/02, you apparently do not have a record of it in your office. I think this is why I did not receive my UBR in the mail this year. I noticed this the other day, and called to speak with you about it. Per Michelle's instructions, I printed off a blank form online, and am submitting the 2003 form along with this letter and a check for \$50. Please reinstate my company accordingly.

Thank you,

Christine H. Okamoto  
Managing Member