2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000002206

1. Entity Name

BE/	\CH	GATE	, LL	C



FILED Mar 06, 2003 8:00 am Secretary of State
03-06-2003 90003 011 ****50.00

i			600 W					
	ce of Business	Mailing Address						
2363 NORTH M MIAMI BEACH I		2363 NORTH MERIDIAN AV MIAMI BEACH FL 33140	/E.					
2. Principal f	Place of Business	3. Mailing Address						
·					{		e iliele ileli e	IANIA CIII IBBI
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			CHECK HERE	E IF MAKING	CHANGES	6
City & State		City & State	City & State		FEI Number 65-107622	.3		Applied For lot Applicab
Zip Country		Zip	Zip Country		5. Certificate of Status Desired Specificate of Status Desired Fee Required			
	6. Name and Address of Curr	ent Registered Agent		7.	Name and Address of New I	Registered A	gent	· · ·
WAS	SERMAN, MARTIN W ESQ.		Name 3	Per 61.	معید جای <u>ں ہے</u> ہے۔ اور م وسمی	·· · -		
2363 NORTH MERIDIAN AVE MIAMI BEACH FL 33140		,	Street Ad		ddress (P.O. Box Number is Not Acceptable)			
			City	,		FL	Zip Cod	de
8. The above the obligati	named entity submits this statement ions of registered agent.	at for the purpose of changing its	registered office or	registered a	gent, or both, in the State of Fl		ımiliar with	, and accept
SIGNATURE _			<u> </u>					
	Signature, typed or printed name of registered a	jent and title if applicable. (NOT)	E: Registered Agent signatur	re required when	reinstating)	DATE		
			OW!!! FEE IS \$5					
		Make Check Payabl	-		State			
			e By May 1, 2003					
9.	MANAGING MEN	MBERS/MANAGERS	10.		ADDITIONS	/CHANGES		
TITLE NAME		☐ Delete	TITLE				☐ Change	Addition
STREET ADDRESS	Zimaalist, deborah 2363 North American ave		NAME CERCEL ARRESCO		•			
CITY-ST-ZIP	MIAMI BEACH FL 33140		STREET ADDRESS					
TITLE	MIAMI DEAUTI FL 33140		CITY_ST_7ID					
		S 2-1-1-	CITY-ST-ZIP	•				
NAME	MGRM	Delete	TITLE	•	.		☐ Change	Addition
i i	mgrm Rahman, Javed	⊠ Delete	TITLE NAME	•			☐ Change	☐ Addition
NAME	MGRM RAHMAN, JAVED 1705 SW 86 AVE	⊠ Delete	TITLE NAME STREET ADDRESS	•			☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	mgrm Rahman, Javed	Delete ☐ Delete ☐	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		בוֹדָאַת - בִּעִּתִּאַ	ن	☐ Change	☐ Addition
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM RAHMAN, JAVED 1705 SW 86 AVE		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	عدد من م 2363	". MERIDIAN A	 ક દ		Æ Addition
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Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), mortida Statutes. Flurther 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.

OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #