2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

Mailing Address

HOLLYWOOD FL 33020

3. Mailing Address

Suite, Apt. #, etc

City & State

Zip

1915 HOLLYWOOD BLVD., #206

DOCUMENT # L0100003703

1. Entity Name

Principal Place of Business

1915 HOLLYWOOD BLVD., #206

2. Principal Place of Business

CAMPBELL, STAN ESQ. 1915 HOLLYWOOD BLVD., #206

HOLLYWOOD FL 33020

the obligations of registered agent.

MGRM

HOLLYWOOD FL 33020

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

9.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIF

CITY-ST-ZIP

CITY-ST-7IE

CITY-ST-ZIP

GUARANTY TRUST & TITLE OF BROWARD, L.C.

Country

6. Name and Address of Current Registered Agent

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

GUARANTY TRUST & TITLE, INC.

1915 HOLLYWOOD BLVD., #206

SIGNATURE AND TYPED OR PRINTED NAME OF S

HOLLYWOOD FL 33320

MANAGING MEMBERS/MANAGERS



Country

Name

City

FILE NOW!!! FEE IS \$50.00

Due By May 1, 2003

10.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

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NAME

TITLE

NAME

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

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 true ampowered to execute this report as required by Chapter 608, Florida Statutes.

NG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

CITY-ST-7IP

CITY-ST-7/P

CITY-ST-ZIP

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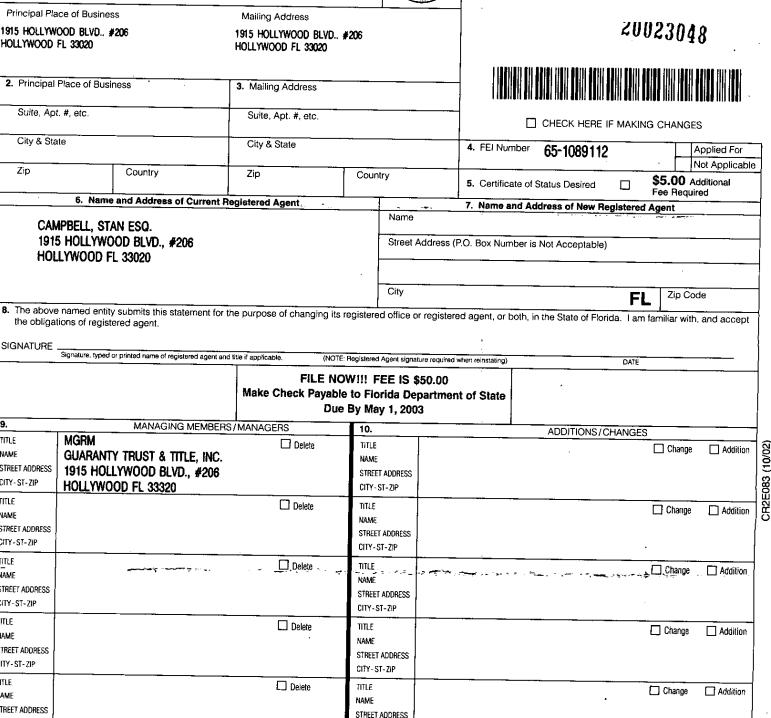
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FILED Feb 05, 2003 8:00 am Secretary of State

02-05-2003 90025 003 ****50.00



Change Change

Daytime Phone #

Date

☐ Addition