

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90225 046 ****50.00

DOCUMENT # L01000004654

1. Entity Name
VALLEY FOUNTAINS LLC

Principal Place of Business Mailing Address
7280 WEST PALMETTO PARK RD., STE. 306N **7280 WEST PALMETTO PARK RD., STE. 306N**
BOCA RATON FL 33433 **BOCA RATON FL 33433**

2. Principal Place of Business Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country

4. FEI Number 65-1102108
 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name **Beaver Properties, Inc.**
 Street Address (P.O. Box Number is Not Acceptable) **7280 W. Palmetto Park Road**
 Suite **306N**
 City **Boca Raton** **FL** Zip Code **33433**

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  **Peter Sabga, President** **04/02/2002**
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

TITLE ☐ Delete
 NAME **MGR**
 STREET ADDRESS **GEORGE, PETER**
 CITY-ST-ZIP **7280 WEST PALMETTO PARK RD., STE. 306N**
BOCA RATON FL 33433

TITLE ☐ Delete
 NAME **MGR**
 STREET ADDRESS **GEORGE, ANTOINETTE**
 CITY-ST-ZIP **7280 WEST PALMETTO PARK RD., STE. 306N**
BOCA RATON FL 33433

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

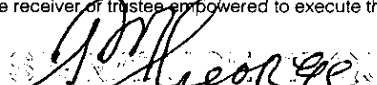
TITLE ☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true 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:  **Peter George** **04/02/2002** **(561) 392-2777**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

0016327

CR2E083 (9/01)