

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90042 023 ****50.00

DOCUMENT # L01000005778

1. Entity Name
AJ REAL ESTATE HOLDINGS & INVESTMENTS, L.C.



Principal Place of Business

Mailing Address

~~3741 NE 163 ST~~
~~SUITE 202~~
~~NORTH MIAMI BEACH FL 33160~~

~~3741 NE 163 ST~~
~~SUITE 202~~
~~NORTH MIAMI BEACH FL 33160~~

2. Principal Place of Business

3. Mailing Address

16850 Collins Ave.

16850 Collins Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 112-202

Suite 112-202

City & State

City & State

Sunny Isles Bch, FL

Sunny Isles Bch, FL

Zip

Country

Zip

Country

33160

USA

33160

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1093927**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEEB, KEVIN L ESQ
2350 CORAL WAY
SUITE 401
MIAMI FL 33145

Name

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

City

FL

Zip Code

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

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 Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGRP** ☐ Delete
NAME **TIKTIN, ADAM J**
STREET ADDRESS **1041 W. COMMERCIAL BLVD., SUITE 401**
CITY-ST-ZIP **FORT LAUDERDALE FL 33309**

TITLE ☒ Change ☐ Addition
NAME **16850 Collins Ave., Suite 112-202**
STREET ADDRESS **Sunny Isles Beach, FL 33160**
CITY-ST-ZIP **Sunny Isles Beach, FL 33160**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Member**
STREET ADDRESS **Jodi P. Tiktin**
CITY-ST-ZIP **16850 Collins Ave, Suite 112-202**
Sunny Isles Beach, FL 33160

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

SIGNATURE REQUIRED

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

2/28/03 305-975-7450

Date

Daytime Phone #

CR2E083 (10/02)