

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 19, 2002 8:00 am
Secretary of State

06-19-2002 90937 001 ***450.00

0001447

DOCUMENT # **L01000005792**

1. Entity Name

REMMINGTON COMMERCIAL ENTERPRISES LLC

Principal Place of Business

**1333 NORTH DUVAL STREET
TALLAHASSEE FL 32302**

Mailing Address

**1333 NORTH DUVAL STREET
TALLAHASSEE FL 32302**

94339



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

866 GLENTHORNE ROAD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HAMMERSMITH, LONDON

City & State

4. FEI Number

Applied For

☒ Not Applicable

Zip

W6 OLP

Country

UK

Zip

Country

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**FLORIDA FILING & SEARCH SERVICES, INC.
1333 NORTH DUVAL STREET
TALLAHASSEE FL 32302**

7. Name and Address of New Registered Agent

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.

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 Department of State
Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☒ Delete
NAME **CAVENDISH MANAGEMENT LLC**
STREET ADDRESS **1000 CONNECTICUT AVE. NW, SUITE 1020**
CITY-ST-ZIP **WASHINGTON DC 20036**

TITLE **MR** ☐ Delete
NAME **MEHMET YESENIOGLU**
STREET ADDRESS **ZAFER SK. MANUEL, APT 11/13**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MR** ☐ Change ☒ Addition
NAME **MEHMET YESENIOGLU**
STREET ADDRESS **ZAFER SK. MANUEL, APT 11/13, D4 HARBIYE**
CITY-ST-ZIP **80230 ISTANBUL, TURKEY**

TITLE **MR** ☐ Change ☒ Addition
NAME **ANDREY KLIMOV**
STREET ADDRESS **866 GLENTHORNE ROAD, HAMMERSMITH**
CITY-ST-ZIP **LONDON W6 OLP, UK.**

TITLE **MR** ☐ Change ☐ Addition
NAME **HUSEYIN BURAK ERTEN**
STREET ADDRESS **ZAFER SK. MANUEL, APT 11/13, D4 HARBIYE**
CITY-ST-ZIP **80230 ISTANBUL, TURKEY**

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

TITLE ☐ Change ☐ Addition
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] FOR AND ON BEHALF OF CAVENDISH MANAGEMENT LLC

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

Date

Daytime Phone #

CR2E083 (9/01)