

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90374 014 ****50.00

DOCUMENT # L01000006460

1. Entity Name

ROBERT CHESS, LLC

Principal Place of Business

**420 MONTECLAIR DRIVE
WESTON FL 33326**

Mailing Address

**420 MONTECLAIR DRIVE
WESTON FL 33326**

955437

2. Principal Place of Business

3

3. Mailing Address

**318 Indian Trace
Suite, Apt. #, etc.
#151**

City & State

Weston FL.

4. FEI Number

65-1098232

Applied For

Not Applicable

Zip

Country

33326

Country

Floward

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ROSEN, HARRY M ESQ
ROSEN KREILING & EICHNER, P.A.
2500 WESTON ROAD, SUITE 220
WESTON FL 33331**

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
NAME
STREET ADDRESS
CITY-ST-ZIP

**mgrm
Robert A. Chess
420 Montclair Dr
Weston, FL 33326**

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

Robert A. Chess mgrm Robert Chess

4/18/02

954-349-6061

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

Date

Daytime Phone #

CR2E083 (9/01)