2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000007324

JAMI PROPERTIES, LLC

SIGNATURE:



FILED
Jan 09, 2003 8:00 am
Secretary of State
01-09-2003 90201 007 ****50.00

Principal Place	e of Business	Mailing Address						
9400 SW 68TH COURT MIAMI FL 33156		9400 SW 68TH COURT MIAMI FL 33156					ALL AND AND AND A COLD IN	11 0131 1327
2. Principal Pl	lace of Business	3. Mailing Address						
0.00	И	0.75 A-1 # -10			_			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Num	4. FEI Number 65-1100970 Applied For Not Applicable		
Zip	Country	Country Zip Cou		try	5. Certifica	5. Certificate of Status Desired Status Desired Fee Required		
	6. Name and Address of Curren	7. Name and Address of New Registered Agent						
FINANCIAL FOUNDATIONS, INC.				Name JERRY ROSEUBACEM				
	SANDY RIDGE DRIVE	Street Addres		(P.O. Box Number is Not Acceptable)				
CLEARWATER FL 33761					<u> </u>			
				City Mi	Y30i		FL Z	956
8. The above	named enalty submits this statement for some statem	for the purpose of changing its	registere	ed office or regist	• • • •	ooth, in the State of Florida.	Larn familiar with,	and accept
٤	$V(1)$ $1, \dots, T$	ERRY ROSEN	. دمیک شد	4.2		, /	8/03	
SIGNATURE	Signature, typed or printed name of registered ager		E: Registere	d Agent signature requir	red when reinstating)		DATE	
- $$ $$ $$		FILE N	OW!!! I	FEE IS \$50.00)			
V		Make Check Payab			ent of State			
				ay 1, 2003	nd .			
9.	MANAGING MEMB		10.			ADDITIONS/CHA	NGES Change	Addition
TITLE NAME	MGR Rosembaum, Jerry M	☐ Delete	TITLE	1			Change	L Addition
STREET ADDRESS	9400 SW 68TH COURT			ET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33156		CITY	-ST-ZIP				
TITLE	MGR	☐ Delete	TITLE				Change	Addition
NAME	WAX, ARNOLD S		NAM	E ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	32 WELWYN ROAD			-ST-ZIP				Ì
TITLE	GREAT NECK NY 11021 MGR	Delete TITL		Ē.			☐ Change	Addition
NAME	ROSENBAUM, BARBARA J		NAM	E				
STREET ADDRESS	9400 SW 68TH COURT			ET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33156			-ST-ZIP			Channe	☐ Addition
TITLE NAME		☐ Delete	TITLE	· ·			Change	☐ Addition
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			CITY	-ST-ZIP				
TITLE	***************************************	☐ Delete	TITLE				☐ Change	☐ Addition
NAME			NAM	E ET ADDRESS				
STREET ADDRESS :				-ST-ZIP				
TITLE		☐ Delete	TITL				☐ Change	Addition
NAME		☐ Delete	NAM	1				
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP		·		-ST-ZIP			 	
hateoibni	certify that the information supplied wi on this report is true and accurate an bility company or the seceiver or trust	id that my signature shall have	the same	e legal effect as it	t made under oa	ath: that I am a managing i	ner certify that the i member or manage	ntormation er of the