

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 16, 2002 8:00 am**  
**Secretary of State**

04-16-2002 90092 047 \*\*\*\*50.00

**DOCUMENT # L01000009164**

1. Entity Name

**HEDONISM ENTERTAINMENT LLC**

Principal Place of Business

**1901 NORTH ATLANTIC BLVD.  
 16A  
 FT. LAUDERDALE FL 33305**

Mailing Address

**1901 NORTH ATLANTIC BLVD.  
 16A  
 FT. LAUDERDALE FL 33305**

2. Principal Place of Business

**2137 NE 28TH CT**

Suite, Apt. #, etc.

**APT #3**

City & State

**LIGHTHOUSE POINT**

Zip

**33064**

Country

**BROWARD**

3. Mailing Address

**2137 NE 28TH CT**

Suite, Apt. #, etc.

**APT #3**

City & State

**LIGHTHOUSE POINT**

Zip

**33064**

Country

**BROWARD**



DO NOT WRITE IN THIS SPACE

4. FEI Number

**65-1114463**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**MATA, ANDYARA**

**1901 NORTH ATLANTIC BLVD.  
 16A  
 FT. LAUDERDALE FL 33305**

7. Name and Address of New Registered Agent

Name

**MATA, ANDYARA**

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

**2137 NE 28TH CT**

**APT #3**

City

**LIGHTHOUSE POINT**

FL

Zip Code

**33064**

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 ☐ Delete

**MGRM  
 NICOLO, RICHARD  
 1901 NORTH ATLANTIC BLVD.  
 FT. LAUDERDALE FL 33305**

TITLE NAME ☐ Delete

**MGR  
 MATA, ANDYARA  
 1901 NORTH ATLANTIC BLVD. #16A  
 FT. LAUDERDALE FL 33305**

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

TITLE NAME ☐ Delete

10. ADDITIONS/CHANGES

TITLE NAME ☐ Change ☐ Addition

**MGRM  
 NICOLO, RICHARD  
 2137 NE 28TH COURT APT #3  
 LIGHTHOUSE POINT, FL 33064**

TITLE NAME ☐ Change ☐ Addition

**MGR  
 MATA, ANDYARA  
 2137 NE 28TH CT APT #3  
 LIGHTHOUSE POINT, FL 33064**

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ 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: *Richard Nicolò* RICHARD NICOLÒ**

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

**4/2/02 954-604035**

Date

Daytime Phone #

CR2E083 (9/01)