

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State
 05-22-2002 90218 040 ****50.00

DOCUMENT # L01000009404

1. Entity Name

TJBXVIII, LLC

Principal Place of Business

6885 SW 18 ST., STE. 7
 BOCA RATON FL 33433

Mailing Address

6885 SW 18 ST., STE. 7
 BOCA RATON FL 33433

966411



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11555 Heron Bay Blvd
 Suite 200
 Coral Springs, FL
 Zip 33076 Country USA

3. Mailing Address

11555 Heron Bay Blvd
 Suite 200
 Coral Springs, FL
 Zip 33076 Country USA

4. FEI Number

41-2028306

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ROTHENBERG, MARK D
 6885 SW 18 ST., STE. 7
 BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name

Mark Rothenberg

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

11555 Heron Bay Blvd

Suite 200

City

Coral Springs

FL

Zip Code 33076

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

4/29/02

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE M
 NAME Mark Rothenberg
 STREET ADDRESS 11555 Heron Bay Blvd #200
 CITY-ST-ZIP Coral Springs, FL 33076

☐ Delete

10. ADDITIONS/CHANGES

☐ Change ☐ Addition

TITLE
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 CITY-ST-ZIP

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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

SIGNATURE Mark Rothenberg

4/29/02

889-603050

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

Date

Daytime Phone #

CR2E083 (9/01)