

2002 UNIFORM BUSINESS REPORT (UBR)

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

04-16-2002 90079 045 *****50.00

DOCUMENT # L01000009506

1. Entity Name

ADMIRAL DANIELS, L.L.C.

Principal Place of Business

C/O JACK THOMAS, INC.
 172 WEST FLAGLER ST., STE. 310
 MIAMI, FL 33130

Mailing Address

C/O JACK THOMAS, INC.
 172 WEST FLAGLER ST., STE. 310
 MIAMI, FL 33130

001100



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

25 S.W. 2nd Avenue

3. Mailing Address

25 S.W. 2nd Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Miami, Florida

Zip

Country

33130

U.S.A.

Zip

Country

33130

U.S.A.

4. FEI Number

65-1113614

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THOMAS, JACK K JR.
 C/O JACK THOMAS, INC.
 172 WEST FLAGLER ST., STE. 310
 MIAMI FL 33130

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

10. ADDITIONS/CHANGES

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
MGR
THOMAS, JACK K JR.
C/O JACK THOMAS INC 172 W FLAGLER ST #310
MIAMI FL 33130

☐ Delete

TITLE
 NAME
 STREET ADDRESS
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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)(l), 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 REQUIRED

Henry R. Block

4-5-2002

(305) 358-5511

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

Date

Daytime Phone #

CR2E083 (9/01)