2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jun 24, 2002 8:00 am

DOCUMENT # L01000009861					Secretary of State 05-12-2002 90581 049 ****50.00			
7	Name IS-KEIL FINE ART, L.L.C.	70001		•	-	05-12-2	002 90581 049 *	·***50.00
	— CHELLINE ANT, LLLG.							
Principal (Place of Business	Mailing Address			1			
	285 5TH AVENUE SOUTH NAPLES FL 34102							
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		r.						ļ
2. Principa	al Place of Business	3. Mailing Address			1			
	IPI. #, etc.	Suite, Apt. #, etc.	574 1	AVENUE	\$0U7	T ⊒_	ern maren geter måten tillfill 19:	IN CHAR HAD IPPA
City & S	tota				1	DO NOT WR	ITE IN THIS SPACE	
City at 3	orala	City & State				Number	. [Applied For
Zip	Country	Zip	Country	у — —	 	5-111637	\$E.00	Not Applicable
	6. Name and Address of Current	Registered Agent	1	- 2,	L	tificate of Status Desired	Fee Regu	Additional ulred
- ₋				Name	/ Nan	ne and Address of New I	legistered Agent	374
REGISTERED CORPORATE AGENTS INC 612 S. GREENWOOD AVE				Street Address (P.O. Box Number is Not Acceptable)				
C	LEARWATER FL 33756						•	
}			-	City			□ Zip Co	
8. The abov	ve named entity submits this statement for	the purpose of changing its	registered	office or renisters	ad popol	or both is the October and	FL Zip Co	
SIGNATURE				amod or registers	so aftern.	or both, in the State of Fig	rida.	
-	Signature, typed or printed name of registered agent at	nd tide if applicable. (NOTE	E: Registered Ag	garti signatura required (vhen reinster	ing)	DATE	
		FILE NO	OW!!! FE	E IS \$50.00			-	
}	· · · · · · · · · · · · · · · · · · ·	Make Check Pay	yable to E By May	Department of 1. 2002	State			
9.	MANAGING MEMBER		10.			ADDITIONS/	CHANGES	
TITLE NAME	SHERMAN, RICHARD K	☐ Delete	TITLE	r) 4		//Souriona)	Change	Addition 8
STREET ADDRESS	-1124 NORTH HILLDALE AVE.		STREET AC	1 -	2 C	een 1	•	36/
TITLE	LOS ANGELES CA	Delete .	CITY-ST-	ZIP NAPL	<u>.e.s</u>	FL 3410E	PLACE	CRZEO83 (9/01)
NAME STREET ADDRESS	SHERMAN, STEPHANIS	LJ Udiete .	TITLE NAME	13			☐ Change	Addition 5
CITY-ST-ZIP	1124 NORTH HILLDALE AVE.		STREET AD		2 (co LANGE	PLACE	
TITLE		☐ Delete	TITLE	NAT	LES	FL 34105		
NAME = Street address -			NAME STREET ADI	normal		ر دار الوجود پیچی دارد در از در است. است. این	☐ Change	Addition
CITY-ST-ZIP.			CITY-ST-Z	1				-
HTLE NAME		☐ Delete	TITLE		_		☐ Change	Addition
STREET ADDRESS City-St-Zip			NAME STREET ADD	PRESS				1
TITLE		☐ Delete	CITY-ST-ZI	P		·		
NAME STREET ADDRESS			TITLE NAME				☐ Change	☐ Addition
CITY-ST-ZIP	,		STREET ADOI	· [
TITLE NAME		☐ Delete	TITLE	- 			<u> </u>	
STREET ADDRESS			NAME				☐ Change	☐ Addition
CITY-SI-ZIP		·	STREET ADDR	, 1				
11. I hereby ce indicated o	ertify that the information supplied with this on this report is true and accurate and that litty company or the receiver or trustee em	filing does not qualify for the my signature shall have the	e exemption	stated in Section	119.07(3)(i), Florida Statutes. I fur	ther certify that the info	ormation
	illity company or the receiver or trustee em	powered to execute this rep	ort as requi	red by Chapter 6	08, Florid	an; mau am a managing a Statutes.	member or manager	of the
SIGNATI		RIUCHRI <u>zw</u>	匠の			3.15.02	77.0 77	
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGN	NING MANAGING MEMBER, MANAGE	ER, OR AUTHOR	RIZED REPRESENTATI	VE	- 1502	239.775.3	200