

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91188 034 ****50.00

DOCUMENT # L01000010335

1. Entity Name

PARAMOUNT BOCA, LLC

Principal Place of Business

**5000 T-REX AVE.
 SUITE 150
 BOCA RATON FL 33431**

Mailing Address

**5000 T-REX AVE.
 SUITE 150
 BOCA RATON FL 33431**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-112 3968

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

**GRUNDT, BRUCE S
 5000 T-REX AVE.
 SUITE 150
 BOCA RATON FL 33431**

Name

Fred B. Rothman

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

5000 T-Rex Avenue - Suite 150

City

Boca Raton

FL

Zip Code

33431

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.

**Fred B. Rothman
 Managing Member**

(NOTE: Registered Agent signature required when reinstating)

DATE

4/26/02

**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 **MANAGING MEMBER** ☐ Delete
 NAME **ROTHMAN, FRED B.**
 STREET ADDRESS **5000 T-REX AVE. STE. 150**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 CITY-ST-ZIP

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

**Fred B. Rothman
 Managing Member**

4/26/02

Date

(561) 998-9200

Daytime Phone #

CR2E083 (9/01)