## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000012406

Entity Name: BIOLOGICAL BUSINESS CREATIVITY, LLC

FILED Apr 29, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

19 WEST FLAGLER STREET ONE SE 3RD AVENUE SUITE 600 SUITE 1440

MIAMI, FL 33130 MIAMI, FL 33131

**Current Mailing Address: New Mailing Address:** 

19 WEST FLAGLER STREET ONE SE 3RD AVENUE SUITE 600 SUITE 1440

MIAMI, FL 33130 MIAMI, FL 33131 US

FEI Number: 65-1124792 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TURNER, DAVID TURNER, DAVID 19 WEST FLAGLER STREET ONE SE 3RD AVENUE SUITE 600 SUITE 1440 MIAMI, FL 33130 MIAMI, FL 33131 US

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: 04/29/2003

> Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MEMBERS:**

**ADDITIONS/CHANGES:** 

MGRM () Delete Title: MGRM (X) Change ( ) Addition

TURNER, DAVID M Name: TURNER, DAVID Name: 19 WEST FLAGLER STREET Address: ONE SE 3RD AVENUE, SUITE 1440 Address:

City-St-Zip: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33131 US

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition Name: ROBINSON, MARIUS Name: ROBINSON, MARIUS

Address: 19 WEST FLAGLER STREET Address: ONE SE 3RD AVENUE, SUITE 1440

City-St-Zip: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33131 US

Title: () Delete Title: MGRM ( ) Change (X) Addition

WRIGHT, DOUGLASS Name: Name: ONE SE 3RD AVENUE, SUITE 1440 Address: Address:

City-St-Zip: MIAMI, FL 33131 US

City-St-Zip:

Title: () Delete Title: MGRM ( ) Change (X) Addition

Name: Name: BROWN, CLINTON

ONE SE 3RD AVENUE, SUITE 1440 Address: Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: DOUGLASS WRIGHT **MGRM** 04/29/2003