

2002 UNIFORM BUSINESS REPORT (UBR)

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

04-16-2002 90076 037 ****50.00

DOCUMENT # L01000012759

1. Entity Name

NEW LIFE HOMES, LLC

Principal Place of Business

**9758 S.W. 24TH ST.
 MIAMI FL 33165**

Mailing Address

**9758 S.W. 24TH ST.
 MIAMI FL 33165**

2. Principal Place of Business

3851 NW 65TH DR

Suite, Apt. #, etc.

3. Mailing Address

3851 NW 65TH DR

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

BOCA RATON FL

City & State

BOCA RATON FL

4. FEI Number

65 1140660

Applied For

☐ Not Applicable

Zip

33496

Country

USA

Zip

33496

Country

USA

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LIMA, FELIX
 9758 S.W. 24TH ST.
 MIAMI FL 33165**

7. Name and Address of New Registered Agent

Name **BELSON, STEVEN A. ESQ**

Street Address (P.O. Box Number is Not Acceptable)
2000 GLADES ROAD

SUITE 306

City **BOCA RATON** FL **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.

(NOTE: Registered Agent signature required when reinstating)

STEVEN A. BELSON

4/5/02

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

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
 NAME **GREENBERG STEVEN**
 STREET ADDRESS **3851 NW 65TH DRIVE**
 CITY-ST-ZIP **BOCA RATON FL 33496**

10. ADDITIONS/CHANGES

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
 NAME
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 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 REQUIRED

STEVEN R GREENBERG 4/1/02 561 9990935

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

Date

Daytime Phone #

CR2E083 (9/01)