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PELMAD CORP

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PELMAD CORP

1/28/02 P0025-041-\$50.00-\$50.00

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2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000013357

1. Entity Name

MSB BUILDERS LLC

Principal Place of Business

10598 NORTHWEST SOUTH RIVER DR.
MIAMI FL 32127

Mailing Address

10598 NORTHWEST SOUTH RIVER DR.
MIAMI FL 32127

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

LUBITZ ALAN H.
1560 BAN REMO AVE. STE. 220
CORAL GABLES FL 33146

4. PEL Number

54-3737025

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional
Fee Required

7. Name and Address of New Registered Agent

Name Jeffrey A. Rynor

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

Mitrani, Rynor, Adamsky & Macaulay

One Southeast Third Avenue, Suite 2200

City

Miami

FL

Zip Code
33131

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 of person or persons of registered agent and date if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

2/18/02

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State
Due By May 1, 2002

MANAGING MEMBERS/MANAGERS

10.

ADDITIONS/CHANGES

NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	ADDITIONS/CHANGES
managing member	JR Creative Builders	PO BOX 565697					☐ Change ☐ Addition
		MIAMI FL 33256-5697					
managing member	William Minanda	10598 NW S River Drive					☐ Change ☐ Addition
		Medley FL 33178					
managing members	Steve Simon	1 SE 8th Avenue #2110					☐ Change ☐ Addition
		MIAMI FL 33131					
							☐ Change ☐ Addition
							☐ Change ☐ Addition
							☐ Change ☐ Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(f), 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:

William Minanda

President

1/24/02 305-888-9200

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

Date

Date - Phone #

CFL0083 (9/01)