

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90735 015 ****50.00

DOCUMENT # L01000013562

1. Entity Name

THANKS AND KEPPI ENTERPRISES, LLC

Principal Place of Business

**2821 NW 99TH TERRACE
 SUNRISE FL 33322**

Mailing Address

**2821 NW 99TH TERRACE
 SUNRISE FL 33322**

B0123103

2. Principal Place of Business

6708 N. UNIVERSITY DRIVE

3. Mailing Address

(SAME AS ABOVE)

City & State

TAMARAC FLORIDA

City & State

(SAME AS ABOVE)

Zip

33321

Country

USA

Zip

(SAME AS ABOVE)

Country

(SAME AS ABOVE)

4. FEI Number

65-1130391

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**MOHL, RONALD L SR.
 3746 WEST OAKLAND OAK BLVD.
 LAUDERDALE LAKES FL 33311**

7. Name and Address of New Registered Agent

DEBRA A. H. MYERS

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

2821 NW. 99TH TERRACE

SUNRISE

FL

Zip Code

33322

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 **DEBRA A. H. MYERS**

(Signature)

May 1, 2002

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

CHECK # 2014-44-May 1 2002

9. MANAGING MEMBERS / MANAGERS

MANAGER
DEBRA A. MYERS
6708 N. UNIVERSITY DR.
TAMARAC FL. 33321

10. ADDITIONS / CHANGES

MANAGER - MGRM
DEBRA A. H. MYERS
2821 NW 99TH TERR
SUNRISE FL. 33322

☐ Delete

☐ Change ☒ Addition

☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

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: **DEBRA A. H. MYERS**

May 1 2002 (954)

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

Date

Daytime Phone #

CR2E083 (9/01)