

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90022 041 ****50.00

DOCUMENT # L01000014450

1. Entity Name

PRINCE GARDENS L.L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2525 N. STATE RD 7

Suite, Apt. #, etc.

115

City & State

HOLLYWOOD FLORIDA

Zip

33021

Country

3. Mailing Address

2525 N. STATE RD 7

Suite, Apt. #, etc.

115

City & State

HOLLYWOOD, FL

Zip

33021

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

AKARON, URI

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

2525 N. STATE RD 7, # 115

City

HOLLYWOOD

FL

Zip Code

33021

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]
Signature, typed or printed name of registered agent and title if applicable.

URI AKARON

4/3/02
DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
MGR	AKARON, URI	2525 N. STATE RD 7, # 115	HOLLYWOOD, FL 33021

**DO NOT WRITE
IN THIS SPACE**

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]
URI AKARON

4/3/02