

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000016072

Entity Name: FLORIDA-ESCAPES LC

FILED
Jan 09, 2002 8:00 AM
Secretary of State

Current Principal Place of Business:

2501 SOUTH OCEAN DRIVE
APT 1106
HOLLYWOOD, FL 33019

Current Mailing Address:

2501 SOUTH OCEAN DRIVE
APT 1106
HOLLYWOOD, FL 33019

New Principal Place of Business:

2501 SOUTH OCEAN DRIVE
508
HOLLYWOOD, FL 33019

New Mailing Address:

2501 SOUTH OCEAN DRIVE
508
HOLLYWOOD, FL 33019

FEI Number: 65-1145880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FERNANDEZ, JEAN-FRANCOIS
2501 SOUTH OCEAN DRIVE
APT 1106
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

FERNANDEZ, JEAN-FRANCOIS
2501 SOUTH OCEAN DRIVE
508
HOLLYWOOD, FL 33019 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: JEAN-FRANCOIS FERNANDEZ

01/09/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: FERNANDEZ, JEAN-FRANCOIS
Address: 2501 SOUTH OCEAN DRIVE
City-St-Zip: HOLLYWOOD, FL 33019

Title: MGR (X) Delete
Name: BURNS, SHERRIE L
Address: 3000 NORTH OCEAN DRIVE
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JEAN-FRANCOIS FERNANDEZ

MGR

01/09/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date