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**FILED**  
**Apr 18, 2002 8:00 am**  
**Secretary of State**

03-25-2002 90019 006 \*\*\*\*50.00

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000016268

1. Entity Name

KB CASINOS, LLC

Principal Place of Business

2312 WILTON DRIVE  
FT. LAUDERDALE FL 33302

Mailing Address

2312 WILTON DRIVE  
FT. LAUDERDALE FL 33302

2. Principal Place of Business

3. Mailing Address

C/o Atlantia Holdings  
645 E. Dania Beach Blvd.  
Dania Beach, FL 33004C/o Atlantia Holdings  
645 E. Dania Beach Blvd.  
Dania Beach, FL 33004

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1155095

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SITTERSON, CURTIS H  
2200 MUSEUM TOWER  
150 WEST FLAGLER STREET  
MIAMI FL 33130

Name

Street Address

City

7. Name and Address of New Registered Agent

Blackburn, Ace J., Jr.  
Cooney Mattson et al.  
2312 Wilton Drive  
Ft. Lauderdale, FL 33305

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)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**Due By May 15, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
As Curator, Managing Member ☐ Delete  
Blackburn, Ace J., Jr.  
C/o Atlantia Holdings  
645 E. Dania Beach Blvd.  
Dania Beach, FL 33004 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ 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)(l), 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

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

Date

Daytime Phone #

*SIGNATURE: BLACKBURN, JR, manager 2/13/02 954-494-3889*