## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 05, 2002 8:00 am Secretary of State DOCUMENT # L01000018021 1. Entity Name 03-05-2002 90055 024 \*\*\*\*50 00 KIYOKEN INVESTMENTS, L.L.C. Principal Place of Business Mailing Address 1653 EAST HARMONY LAKE CIRCLE 1653 EAST HARMONY LAKE CIRCLE DAVIE FL 33324 DAVIE FL 33324 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 27-0002223 Not Applicable \_ Country , Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MICHAEL A. FISCHLER, ESQ. BEARDEN, DAWN Street Address (P.O. Box Number is Not Acceptable) 1653 EAST HARMONY LAKE CIRCLE 116 S.E. 6th Court DAVIE FL 33324 Fort Lauderdale Zin Gode 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. MICHAEL A. FISCHLER, ESQ. Signatu (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES TITLE DAWN BEARDEN, President 🗆 Delete TITLE ☐ Addition ☐ Change NAME Elite Business Concepts, Inc. Maragan Member STREET ADDRESS 1653 East Harmony Lake Circle CITY-ST-ZIP CITY-ST-ZIP Davie, Florida 33324 TITLE ☐ Delete TITLE Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**FILED**