

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90125 008 ****50.00

DOCUMENT # L01000019201

1. Entity Name

TEAM USA LLC

Principal Place of Business

**3330 S. VINELAND ROAD
 ORLANDO FL 32811**

Mailing Address

**3330 S. VINELAND ROAD
 ORLANDO FL 32811**

2. Principal Place of Business

3330 S. VINELAND ROAD

3. Mailing Address

3330 S. VINELAND ROAD

Suite, Apt. #, etc.

SUITE C

Suite, Apt. #, etc.

SUITE C

City & State

ORLANDO, FL

City & State

ORLANDO, FL

Zip

32811

Country

USA

Zip

32811

Country

USA

4. FEI Number

NOT YET OBTAINED

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MEHTA, SHARAD
 3330 S. VINELAND ROAD
 ORLANDO FL 32811**

7. Name and Address of New Registered Agent

Name

MEHTA, SHARAD

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

3330 S. VINELAND RD.

City

ORLANDO

FL

Zip Code
32811

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

SHARAD MEHTA (SHARAD MEHTA)

4.16.2002

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 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 SHARAD MEHTA
 3330 S. VINELAND ROAD, #C
 ORLANDO, FL 32811** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 ELLIOTT LIGHTMAN
 9822 EMERALD LINKS
 TAMPA, FL 33626** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
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 CITY-ST-ZIP
☐ Delete

TITLE
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 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
☐ Change ☐ Addition

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

CR2E083 (9/01)

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:

SHARAD MEHTA

4.16.2002 407-245-3600

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

Date

Daytime Phone #