

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90016 038 ****50.00

DOCUMENT # L01000020283

1. Entity Name

GSHP LLC



Principal Place of Business

231 8TH STREET
 MIAMI BEACH FL 33139

Mailing Address

231 8TH STREET
 MIAMI BEACH FL 33139

2. Principal Place of Business

231 8th Street

3. Mailing Address

231 8th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI BEACH, FLORIDA

City & State

MIAMI BEACH, FLORIDA

Zip

33139

Country

USA

Zip

33139

Country

USA

4. FEI Number

65-1155319

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

OMORES, ERIC
 7730 MIAMI VIEW DRIVE
 NORTH BAY VILLAGE FL 33141

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

ERIC OMORES

(NOTE: Registered Agent signature required when reinstating)

04/15/02

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 MGRM
 OMORES, GISELE
 7730 MIAMI VIEW DRIVE
 NORTH BAY VILLAGE FL 33141 ☐ Delete

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

TITLE
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 STREET ADDRESS
 CITY-ST-ZIP
 MGRM
 OMORES, ERIC
 7730 MIAMI VIEW DRIVE
 NORTH BAY VILLAGE FL 33141 ☐ Delete

TITLE
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TITLE
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 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)(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

ERIC OMORES

04/15/02 305-672-2721

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

Date

Daytime Phone #

CR2E083 (9/01)