

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 21, 2003 8:00 am**  
**Secretary of State**

02-21-2003 90017 022 \*\*\*\*50.00

**DOCUMENT # L01000020346**

1. Entity Name

TEMPONE'S, L.L.C.



Principal Place of Business

3440 HOLLYWOOD BLVD.  
SUITE 380  
HOLLYWOOD FL 33021

Mailing Address

2054 E. CROWN POINTE BLVD  
NAPLES FL 34112

2. Principal Place of Business

950 CENTRAL AVE

3. Mailing Address

2054 E. CROWN POINTE BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NAPLES, FL

City & State

NAPLES, FL

Zip

34102

Country

USA

Zip

34112

Country

USA

4. FEI Number

65-1156601

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional

Fee Required

6. Name and Address of Current Registered Agent

ROTH, LEONARDO A ESQ.  
3440 HOLLYWOOD BLVD.  
SUITE 380  
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name

KARIME H. De Tempone

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

2054 E. Crown Pointe Blvd.

City

Naples

FL

Zip Code

34112

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

2/17/03

DATE

**FILE NOW!!! FEE IS \$50.00**

**Make Check Payable to Florida Department of State  
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM  
NAME HASSEIN DE TEMPONE, KARIME RITA P  
STREET ADDRESS 3440 HOLLYWOOD BLVD.  
CITY-ST-ZIP HOLLYWOOD FL 33021 ☒ Delete

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM  
NAME HASSEIN DE TEMPONE, KARIME RITA P  
STREET ADDRESS 2054 E. CROWN POINTE BLVD.  
CITY-ST-ZIP NAPLES, FL 34112 ☒ Change ☐ Addition

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

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

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

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

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
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 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

2/17/03 (239)248-7144

Date

Daytime Phone #

CR2E083 (10/02)