

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90297 002 ****55.00

DOCUMENT # L01000020404

1. Entity Name

CT8000 FEDERAL HIGHWAY, LLC

Principal Place of Business

**8000 NORTH FEDERAL HIGHWAY
BOCA RATON FL 33487-1620**

Mailing Address

**8000 NORTH FEDERAL HIGHWAY
BOCA RATON FL 33487-1620**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Third Floor

Suite, Apt. #, etc.

Third Floor

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1155142

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VALDES-FAULI CORPORATE SERVICES, INC.
500 E. BROWARD BLVD.
SUITE 1400
FT. LAUDERDALE FL 33394**

Name: **Rebecca L. Hamilton**

c/o **Sachs, Sax & Klein, P.A.**

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

301 Yamato Road

Northern Trust Plaza, Suite 4150

City

Boca Raton

FL

33431

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, applicable

(NOTE-Registered Agent signature required when reinstating)

DATE

3-02-02

**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

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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:

Joseph W. Veccia

Joseph W. Veccia 4-23-02 561-953-5200

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

Date

Daytime Phone #

CR2E083 (9/01)