2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91002 040 ****50.00

DOCUMENT # L01000021956

1. Entity Name
SUNRISE MIDDLE RIVER DEVELOPMENT LLC

Principal Place of Business	Mailing Address
701 S.E. 2ND COURT FT. LAUDERDALE, FL 33301	701 S.E. 2ND COURT FT. LAUDERDALE, FL 33301

30062911

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
5300 NW 12 Avenue	5300 NW 12 Avenue
Suite, Apt. #, etc.: #1	Suite, Apt. #, etc.: # 1
City & State: Fort Lauderdale FL	City & State: Fort Lauderdale, FL
Zip: 33309 Country: USA	Zip: 33309 Country: USA

4. FEI Number: 46-0473770 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MOGERMAN, RICHARD M
150 SOUTH PINE ISLAND ROAD
SUITE 130
PLANTATION, FL 33324

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. 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) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE: MGR NAME: DANAN, PATRICK STREET ADDRESS: 701 S.E. 2ND COURT CITY-ST-ZIP: FT. LAUDERDALE, FL 33301	☒ Delete	TITLE: MGR NAME: Danan Patrick STREET ADDRESS: 5300 NW 12 Avenue #1 CITY-ST-ZIP: Fort Lauderdale, FL 33309	☒ Change ☐ Addition
TITLE: MGR NAME: MERCOR, LEONARD J STREET ADDRESS: 701 S.E. 2ND COURT CITY-ST-ZIP: FT. LAUDERDALE, FL 33301	☒ Delete	TITLE: MGR NAME: Cohen Steven STREET ADDRESS: 5300 NW 12 Avenue #1 CITY-ST-ZIP: Fort Lauderdale, FL 33309	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E063 (10/02)

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] MGR Patrick Danan, 4-23-03 (954) 776-1698
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #