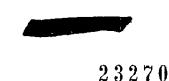
LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

L01000022776

FILED Apr 10, 2002 8:00 am Secretary of State

03-07-2002 90151 021 ****50.00



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address 3206 Calle Largo Rr 3206 Calle Suite, Apt. #, etc. City & State
Hollywood Hollywood 33021

DO NOT WRITE IN THIS SPACE

Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired

7. Name and Address of Current Registered Agent

Fee Required

Zip Code 3302

		RITE
		ACE

Brian Carter Street Address (PO, Box Number is Not Acceptable)

به هودن بيال*ه H* 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.

4. FEI Number 01-05

Signature, typed or printed name of

Poil litt 1006

DOCUMENT#

ASHFORD PROPERTIES LLC

1. Entity Name

FEE IS \$50.00 Make Check Payable to Department of State **DUE BY MAY 1**

MANAGING MEMBERS/MANAGERS 9. crossy A - Morg TITLE NAME MANAGE STREET ADDRESS STREET ADDRESS CATY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 3204 Celle Lan 33021 CITY-ST-ZIP CITY-ST-ZIP Hollywood, FL MAME NAME . STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-70P CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIME TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-7P CITY-ST-ZIP

11. 1 hereby certify that the information supplied with this filling 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: HING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 2/20/02

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