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## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SECRETARY OF STATE DOCUMENT # L02000001153 DIVISION OF CORPORATIONS 1. Entity Name .03 OCT -9 PM 3:49 13695, L.L.C. 1010 DO NOT WRITE IN THIS SPACE 2, Principal Place of Business 3. Mailing Address PO Box 2972 13695-13725 N.E. 3rd Court Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 75-3041050 North Miami, FL Hallandale Beach, FL Not Applicable Zip 33161 Country Zip 33008 \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name Bruce Smoler DO NOT WRITE Ì Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 2611 Hollywood Blvd. City Hollywood 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. **Bruce Smoler** SIGNATURE ( FEE IS \$50.00 Make Check Payable to Florida Department of State **DUE BY MAY 1** MANAGING MEMBERS/MANAGERS 9. CR2E083B (12/02) TITLE TITLĖ Member/Manager NAME NAME Felice Adelstein STREET ADDRESS PO Box 2972 STREET ADDRESS Hallandale Beach, FL 33008 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE -TITLE \_\_ NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITI F IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

. Felice Adelstein, Member/Manager

Daytime Phone #

13695, L.L.C. PO Box 2972 DIVISION OF CORPORATIONS

Halladale Beach, FL 33008 OCT -9 PM 3: L

October 07, 2003

Division of Corporations P.O. Box 6478 Tallahassee, FL 32314

Re: L02000001153

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To Whom It May Concern:

Please be advised that the mailing address for my limited liability company has changed and I never received my UBR for 2003.

Enclosed is a UBR report that I have filled out along with a check for \$50.00. Please accept this in full satisfaction of my year 2003 filing requirements.

Thank you,

Lelice Pede

Felice Adelstein

Member/Manager