

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 02, 2003 8:00 am**  
**Secretary of State**

0004464

**DOCUMENT # L02000002341**

1. Entity Name

**NORTHPARK HOLDINGS LLC**



01-22-2003 90091 004 \*\*\*\*50.00  
09-02-2003 90123 024 \*\*\*\*50.00

Principal Place of Business

**1900 PHILLIPS POINT WEST  
777 SOUTH FLAGLER DRIVE  
WEST PALM BEACH FL 33401-6198**

Mailing Address

**1900 PHILLIPS POINT WEST  
777 SOUTH FLAGLER DRIVE  
WEST PALM BEACH FL 33401-6198**

2. Principal Place of Business

**1485 North Park Drive**

3. Mailing Address

**2665 S. Bayshore Drive**

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
**Suite 703**

City & State

**Weston, Florida**

City & State

**Miami, Florida**

4. FEI Number

**35-2174614**

Applied For

Not Applicable

Zip

**33326**

Country

**USA**

Zip

**33133**

Country

**USA**

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**SHERWIN P. SIMMONS, P.A.  
200 S. BISACAYNE BLVD.  
SUITE 4000  
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name  
**World Corporate Services, Inc.**  
Street Address (P.O. Box Number is Not Acceptable)  
**2665 S. Bayshore Drive**  
**Suite 703**  
City  
**Miami, FL** Zip Code  
**33133**

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 September 24, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition  
**MANAGER  
CHHABRA, NARESH  
1485 North Park Drive  
Weston, Florida 33326**

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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:

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

**Signature** **Naresh Chhabra** **8/19/03 (305) 858-9900**

Date

Daytime Phone #

CR2E083 (4/03)