

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 FEB 27 AM 9:40

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**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L02000004663

1. Entity Name
LEFTA ENTERPRISES, L.L.C.



Principal Place of Business
2601 EAST OAKLAND PARK BLVD.
SUITE 608
FT. LAUDERDALE, FL 33306

Mailing Address
2601 EAST OAKLAND PARK BLVD.
SUITE 608
FT. LAUDERDALE, FL 33306

100013165371
02/27/03--01045--023 ***150.00



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
3900 SW 30 Avenue

3. Mailing Address
3900 SW 30 Avenue

Suite, Apt. #, etc.
3

Suite, Apt. #, etc.
3

City & State
Ft. Lauderdale, FL

City & State
Ft. Lauderdale, FL

4. FEI Number ☒ Applied For
Not Applicable

Zip
33312

Country
Broward

Zip
33312

Country
Broward

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

6. Name and Address of Current Registered Agent

RICHARDSON, KENNETH E
2601 EAST OAKLAND PARK BLVD.
SUITE 608
FT. LAUDERDALE, FL 33306

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

TITLE MGRM ☐ Delete
NAME RICHARDSON, KENNETH E
STREET ADDRESS 2601 EAST OAKLAND PARK BLVD.
CITY-ST-ZIP FT. LAUDERDALE, FL 33306

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Terry McKerchie ☐ Change ☒ Addition
NAME
STREET ADDRESS 3900 SW 30 Avenue, Suite 3
CITY-ST-ZIP Ft. Lauderdale, FL 33312

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 606, Florida Statutes.

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

2/25/03

Date

954-581-1606

Daytime Phone #

CR2E083 (10/02)