

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

**FILED**  
**Apr 17, 2003 8:00 am**  
**Secretary of State**

04-17-2003 90025 033 \*\*\*\*50.00

DOCUMENT # L02000006626

1. Entity Name  
**BERMUDA RIVIERA 30, LLC**



Principal Place of Business: 11555 HERON BAY BLVD, SUITE 200, CORAL SPRINGS FL 33076  
Mailing Address: 11555 HERON BAY BLVD, SUITE 200, CORAL SPRINGS FL 33076

2. Principal Place of Business: Suite, Apt. #, etc.  
3. Mailing Address: Suite, Apt. #, etc.  
City & State



CHECK HERE IF MAKING CHANGES

Zip: Country: Zip: Country:

4. FEI Number: **30-0055793**  
Applied For:  Not Applicable

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

6. Name and Address of Current Registered Agent  
**WAROFF, MICHAEL G**  
**11555 HERON BAY BLVD**  
**SUITE 200**  
**CORAL SPRINGS FL 33076**

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: \_\_\_\_\_ (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                        | <input type="checkbox"/> Delete            |
| NAME                         | <i>MGRM Mark Rothberg</i>                  |
| STREET ADDRESS               | <i>11555 Heron Bay Blvd, Suite 200</i>     |
| CITY-ST-ZIP                  | <i>Coral Springs, FL 33076</i>             |
| TITLE                        | <input type="checkbox"/> Delete            |
| NAME                         |  |
| STREET ADDRESS               |  |
| CITY-ST-ZIP                  |  |
| TITLE                        | <input checked="" type="checkbox"/> Delete |
| NAME                         |  |
| STREET ADDRESS               |  |
| CITY-ST-ZIP                  |  |
| TITLE                        | <input type="checkbox"/> Delete            |
| NAME                         |  |
| STREET ADDRESS               |  |
| CITY-ST-ZIP                  |  |
| TITLE                        | <input type="checkbox"/> Delete            |
| NAME                         |  |
| STREET ADDRESS               |  |
| CITY-ST-ZIP                  |  |

| 10. ADDITIONS/CHANGES |   |
|-----------------------|---|
| TITLE                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                  |   |
| STREET ADDRESS        |   |
| CITY-ST-ZIP           |   |
| TITLE                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                  |   |
| STREET ADDRESS        |   |
| CITY-ST-ZIP           |   |
| TITLE                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                  |   |
| STREET ADDRESS        |   |
| CITY-ST-ZIP           |   |
| TITLE                 | <input type="checkbox"/> Change <input type="checkbox"/> 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 608, Florida Statutes.

SIGNATURE: *[Signature]* SIGNATURE: *Mark Rothberg* 4-14-03 954.603.0500  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (10/02)