

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000007304

FILED
Mar 27, 2003
Secretary of State

Entity Name: DEL MAR DEVELOPMENT, L.L.C.

Current Principal Place of Business:

162 BRENT CIR.
OLDSMAR, FL 34677

New Principal Place of Business:

309 HARBOR DR
BELLEAIR BEACH, FL 3786

Current Mailing Address:

162 BRENT CIR.
OLDSMAR, FL 34677

New Mailing Address:

309 HARBOR DR
BELLEAIR BEACH, FL 33786

FEI Number: 75-3044368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX, GREGORY A ESQ
28050 US 19 N., STE. 100
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: SZASZ, STEVE
Address: 701 ST. PETERSBURG DR
City-St-Zip: OLDSMAR, FL 34677

Title: MGRM () Change (X) Addition
Name: SZASZ, ROBERT
Address: 701 ST PETERSBURG DR
City-St-Zip: OLDSMAR, FL 34677

Title: MGRM () Change (X) Addition
Name: ADLER, LASZLO
Address: 701 ST. PETERSBURG DR.
City-St-Zip: OLDSMAR, FL 34677

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: STEVE SZASZ

MGRM

03/27/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date