

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90576 031 ****55.00

DOCUMENT # L02000009133

1. Entity Name

OPA-LOCKA WLEC/HURT BUILDING, LLC



Principal Place of Business

C/O OPA-LOCKA COMMUNITY DEVELOPMENT CORP
490 OPA-LOCKA BLVD., STE. 20
OPA-LOCKA FL 33054

Mailing Address

C/O OPA-LOCKA COMMUNITY DEVELOPMENT CORP
490 OPA-LOCKA BLVD., STE. 20
OPA-LOCKA FL 33054

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LITTLE, JOHN M ESQ
LEGAL SERVICES OF GREATER MIAMI, INC.
3000 BISCAYNE BLVD., STE. 300
MIAMI FL 33137

Name STEPHANIE WILLIAMS-BALDWIN

Street Address (P.O. Box Number is Not Acceptable)

490 OPA-LOCKA BOULEVARD, STE 20

City OPA-LOCKA

FL

Zip Code 33054

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 *Stephanie Williams-Baldwin* STEPHANIE WILLIAMS-BALDWIN

APRIL 18, 2003

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

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
MGR
WILLIE LOGAN
490 OPA-LOCKA BLVD, STE 20
OPA-LOCKA, FL 33054

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
MGR
STEPHANIE WILLIAMS-BALDWIN
490 OPA-LOCKA BLVD, STE 20
OPA-LOCKA, FL 33054

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
MGR
MILTON FELTON
18800 NW 2 AVENUE
MIAMI, FL 33169

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
MGR
NASHID SABIR
18350 NW 2 AVE, 5TH FL
MIAMI, FL 33169

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
MGR
DAVID PEMBERTON
2520 NW 156 STREET
OPA-LOCKA, FL 33054

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
MGR
MICHAEL MARTIN
6418 NW 82 AVENUE
PARKLAND, FL 33067

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 *Stephanie Williams-Baldwin* STEPHANIE WILLIAMS-BALDWIN 4/18/03 (305) 687-3545

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

Date

Daytime Phone #

CR2E083 (10/02)