

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 04, 2003 8:00 am
Secretary of State

07-25-2003 90066 027 ****50.00

DOCUMENT # L02000009481

1. Entity Name

ARBEN PROPERTIES CO., LLC



Principal Place of Business

**2001 S. RIDGEWOOD AVE.
SOUTH DAYTONA FL 32119**

Mailing Address

**2001 S. RIDGEWOOD AVE.
SOUTH DAYTONA FL 32119**

55055659

2. Principal Place of Business

3. Mailing Address

☐ CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

20-0179213

Applied For

☐ Not Applicable

Zip

Country

Zip

Country

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

**HUGHES, BARRY E
2001 S. RIDGEWOOD AVE.
SOUTH DAYTONA FL 32119**

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 September 24, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Delete
NAME **BAJRAKTARI, HAJDAR**
STREET ADDRESS **817 E. 188TH ST.**
CITY-ST-ZIP **BRONX NY 10458**

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

TITLE **MGR** ☐ Delete
NAME **GECAJ, RUSTEN**
STREET ADDRESS **817 E. 188TH ST.**
CITY-ST-ZIP **BRONX NY 10458**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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 608, Florida Statutes.

SIGNATURE:

SIGNATURE REQUIRED

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

Date

Daytime Phone #

CP2E083 (4/03)

attachment

Barry E. Hughes

TELEPHONE
(386) 788-9667

ATTORNEY-AT-LAW
2001 SOUTH RIDGEWOOD AVENUE
SOUTH DAYTONA, FLORIDA 32119

55055659

FACSIMILE
(386) 322-2564

E-MAIL ADDRESS: HUGHES72@BELLSOUTH.NET

August 27, 2003

Certified Mail #7002 0510 0001 2688 7058
Return Receipt Requested

Florida Department of State
Division of Corporations
Post Office Box 6478
Tallahassee, FL 32314

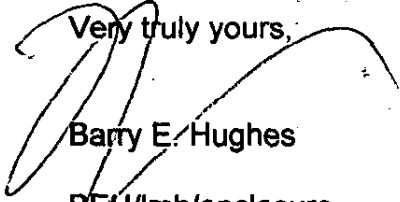
Re: Arben Properties Co., LLC
Reference No: 02000009481

Dear Sir or Madam:

The undersigned is in receipt of your letter dated July 29, 2003 with regard to the incomplete 2003 limited Liability Company Uniform Business Report for the above referenced limited liability company. Pursuant to your correspondence, I am enclosing herewith the above mentioned report with Block 4 being completed. Also, enclosed please find a copy of your correspondence for your reference.

Should you require any further information, then please do not hesitate to contact me.

Very truly yours,


Barry E. Hughes

BEH/lmh/enclosure