

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90274 036 \*\*\*\*50.00

**DOCUMENT # L02000010357**

1. Entity Name  
**LINCOLN ROAD MAGAZINE LLC**



Principal Place of Business  
**FIRST UNION FINANCIAL CENTER - SUITE 2000  
200 SOUTH BISCAYNE BOULEVARD  
MIAMI, FL 33131**

Mailing Address  
**FIRST UNION FINANCIAL CENTER - SUITE 2000  
200 SOUTH BISCAYNE BOULEVARD  
MIAMI, FL 33131**

2. Principal Place of Business  
**2699 S. Bayshore Dr.  
Suite, Apt. #, etc.  
7th Floor**

3. Mailing Address  
**2699 S. Bayshore Dr.  
Suite, Apt. #, etc.  
7th Floor**

City & State  
**Miami, FL**  
Zip  
**33133** Country  
**USA**

City & State  
**Miami, FL**  
Zip  
**33133** Country  
**USA**



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number  
**30-0076027** Applied For  
☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

**HARPER, GEORGE R ESQ  
FIRST UNION FINANCIAL CENTER - SUITE 2000  
200 SOUTH BISCAYNE BOULEVARD  
MIAMI, FL 33131**

**7. Name and Address of New Registered Agent**

Name  
**Corpro, Inc.**  
Street Address (P.O. Box Number is Not Acceptable)  
**2699 South Bayshore Drive, 7th Floor**  
City **Miami** FL Zip Code **33133**

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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete

**10. ADDITIONS/CHANGES**

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
MGR	Hernandez, Kevin A.	2699 S. Bayshore Drive, 7th Floor	Miami, FL 33133		

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

786.621.6270

Case

Daytime Phone #

CR2E083 (10/02)