

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000012160

Entity Name: NIAGARA MARKET, LLC

FILED
Jan 07, 2003
Secretary of State

Current Principal Place of Business:

3515 VILLAGE BLVD
#302
WEST PALM BEACH, FL 33409 US

Current Mailing Address:

3515 VILLAGE BLVD
#302
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

8732 OLDHAM WAY
WEST PALM BEACH, FL 33412 US

New Mailing Address:

8732 OLDHAM WAY
WEST PALM BEACH, FL 33412 US

FEI Number: 04-3672570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRIANESE, MICHAEL
3515 VILLAGE BLVD
#302
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

STRIANESE, VINCENT
3515 VILLAGE BLVD
#302
WEST PALM BEACH, FL 33409 US

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: VINCENT STRIANESE

01/07/2003

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: STRIANESE, VINCENT J
Address: 3515 VILLAGE BLVD
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: MGRM () Delete
Name: BONANNO, LAWRENCE
Address: 818 BAYBERRY DRIVE
City-St-Zip: LAKE PARK, FL 33403 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VINCENT STRIANESE

MGRM

01/07/2003

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