

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2003 8:00 am
Secretary of State

04-30-2003 90185 041 ****55.00

DOCUMENT # L02000012459

1. Entity Name

SALADA PROPERTIES, L.L.C.

Principal Place of Business

100 W. CYPRESS CREEK RD., STE. 700
FT LAUDERDALE FL 33309

Mailing Address

100 W. CYPRESS CREEK RD., STE. 700
FT LAUDERDALE FL 33309

2. Principal Place of Business

1955 N.E. 38 CT

3. Mailing Address

1955 N.E. 38 CT

Suite/Apt. #, etc.

2106

Suite/Apt. #, etc.

2106

City & State

AVENTURA FL

City & State

AVENTURA

Zip

33180

Country

U.S.A.

Zip

33180

Country

U.S.A.

4. FEI Number

EIN 020612225

Applied For

Not Applicable

5. Certificate of Status Desired

A - \$5.00 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

BLODIG, GREGORY J
100 W. CYPRESS CREEK RD., STE. 700
FT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name: GEORGE GREEN - (DIRECTOR)
Street Address (P.O. Box Number is Not Acceptable):
1955 N.E. 38 CT
SUITE 2106
City: AVENTURA FL Zip Code: 33180

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

George Green

(NOTE: Registered Agent signature required when reinstating)

4/23/03

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: MGR
NAME: MARTINCAK, DANIEL
STREET ADDRESS: 2900 N.E. 9TH ST.
CITY-ST-ZIP: FT LAUDERDALE FL 33304
☐ Delete DIRECTOR

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
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CITY-ST-ZIP: ☐ Delete

10. ADDITIONS/CHANGES

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

TITLE: ☐ Change ☒ Addition
NAME: GEORGE GREEN
STREET ADDRESS: 1955 N.E. 38 CT
CITY-ST-ZIP: AVENTURA FL 33180
DIRECTOR

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

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

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

4/23/03

Date

Daytime Phone #

305 - 937-0485

CR2E083 (10/02)