


LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # <u>L02000015104</u>	
1. Entity Name <u>Zakara, LLC</u>	

FILED

03 NOV -3 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400024388654
11/03/03--01101--011 **155.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>1 S. Orange Ave.</u> Suite, Apt. #, etc. <u>Suite #304</u> City & State <u>Orlando, FL</u> Zip <u>32801</u> Country <u>USA</u>		3. Mailing Address <u>1 S. Orange Ave.</u> Suite, Apt. #, etc. <u>suite #304</u> City & State <u>Orlando, FL</u> Zip <u>32801</u> Country <u>USA</u>	
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DO NOT WRITE IN THIS SPACE

4. FEI Number <u>03-0459675</u>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name <u>Mark NeJame</u>	
	Street Address (P.O. Box Number is Not Acceptable) <u>1 South Orange Ave</u> <u>suite #304</u>	
	City <u>Orlando</u>	FL Zip Code <u>32801</u>

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 Mark E. NeJame Mark E. NeJame DATE 10/29/03

FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1	
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9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>MGRM</u> <u>Josie Arizola</u> <u>1 South Orange Ave suite 304</u> <u>Orlando, FL 32801</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>MGRM</u> <u>Mark NeJame</u> <u>1 South Orange Ave suite 304</u> <u>Orlando, FL 32801</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: Mark E. NeJame Mark E. NeJame DATE 10/29/03

CR2E083B (12/02)