

FILED
Jul 24, 2003 8:00 am
Secretary of State

05-05-2003 90692 015 ****50.00

2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000016780

1. Entity Name

GHR ENTERPRISES, LLC



Principal Place of Business

2805 LITTLE DEAL ROAD
TALLAHASSEE FL 32308

Mailing Address

2805 LITTLE DEAL ROAD
TALLAHASSEE FL 32308

2. Principal Place of Business

2477 Eagle Run Drive

Suite, Apt. #, etc.

3. Mailing Address

2101 West Commercial Blvd.

Suite, Apt. #, etc.

4100

City & State

Fort Lauderdale, FL

City & State

Fort Lauderdale, FL

Zip
33327

Country
US

Zip
33309

Country
US

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LYNN, MARK J
2101 WEST COMMERCIAL BLVD., SUITE 4100
FORT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

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 reappointing)

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
MGRM
TELES-GADIA, MARIA
2101 WEST COMMERCIAL BLVD., SUITE 4100
FORT LAUDERDALE FL 33309

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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10. ADDITIONS / CHANGES

TITLE
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CITY- ST- ZIP
☐ Change ☐ Addition

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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 808, Florida Statutes.

SIGNATURE:

SIGNATURE

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

4/28/03 (954) 217-1757