## **2003 LIMITED LIABILITY COMPANY** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L02000018246

1. Entity Name

4201 N. FEDERAL HWY LLC



**FILED** Mar 11, 2003 8:00 am Secretary of State

03-11-2003 90025 023 \*\*\*\*50.00

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Principal Place	of Busines	s		Mailing Address		•		1					
C/O LEDER GROUP INVESTMENT PROPERTIES 6530 W ROGERS CIR. STE. 31 BOCA RATON FL 33487				C/O LEDER GROUP INVESTMENT PROPERTIES 6530 W ROGERS CIR. STE. 31 BOCA RATON FL 33487					1/ <b>0</b> /1 <b>0</b> 1/1 <b>4.3</b> 1/1	1 (1 <b>.1</b> )) <b>2 1</b> /01 <b>4 6</b>	li <b>se</b> lit <b>sola</b> i	#1 <b>60</b> k 10k10 11 <b>0</b> 1	<b>B:B:6 B</b> iin ( <b>44</b> )
2. Principal Pla	ace of Busin	ness	3	3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				T CHECK HERE IF MAKING CHANGES					
City & State				City & State				4. FEI Number Applied Fo   Applied Fo   Not Applied Fo					Applied For
Zip Country				Zip	try	~	5. Certificate of Status Desired 55.00 Additional Fee Required					ditional	
	6. Name	and Address of Currer	istered Agent				7. Name a	nd Addre	ss of New F	Registered	Agent	•	
DANIELS, NICHOLAS M ESQ.							Name						
	E 2400		Street Address (P.O. Box Number is Not Acceptable)										
MIAM	l FL 3313	1				City					FI	Zip Cod	de
8. The above n	amed entity	v submits this statement	for the	purpose of changing its	registera	ed office o	r registers	ed agent or l	noth in the	State of Ele		_	and accord
the obligation	ns of regist	ered agent.	101 1110	purpose of changing its	registere	a onice o	i registere	su agent, or t	3001, RT 016	s State Of Tit	Jilua. Faili	riairillai wiiis	, and accept
SIGNATURE													
SIGNATURE	ignature, typed	or printed name of registered ager	nt and titl	e if applicable. (NOTE	: Registered	d Agent signa	ture required v	when reinstating)			DATE		
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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 propowered 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